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**Alien Tears:
Mourning, Melancholia, and Identity in AIDS Literature**

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TABLE OF CONTENTS

Acknowledgments.....	iv
Chapter 1	
Introduction.....	1
Time Span and History.....	3
Geography, Language, and Community.....	13
Grief and the Gay Community.....	18
The Legacy of Gay Literature and Loss.....	19
Mourning and Melancholia.....	28
The “Pathology” of Melancholia.....	35
Gay Men and Mourning in the Time of AIDS.....	37
Structure of the Thesis.....	39
Chapter 2	
Mourning, Identity, and Gay AIDS Fiction.....	49
Narrative and Mourning.....	51
Realism.....	53
Disclosure.....	57
Time.....	62
Universal Narrative.....	71
Objects and Mourning.....	79
Fort/Da.....	81
Objects and the Past.....	85
Self and Non-self: Objects.....	90
Swimming and the Abject.....	93
Conclusion.....	100
Chapter 3	
Queer AIDS Literature: The Hybrid Text.....	102
Postmodern AIDS Literature.....	104
Queer.....	109
Illness and Queer Identity.....	112
Illness = Queer.....	117
Authorship.....	123
Textual Hybridity and Viral Infection.....	127
Autobiography: Lejeune’s Pact Violated.....	133
Narrative Logic.....	141
Conclusion.....	153



Chapter 4

Queer AIDS Literature: Ontology, Melancholia, Fetishism.....155

Ontology.....159

Melancholia.....164

Melancholia: Introjection and Incorporation.....165

“White Glasses”171

White Glasses = HIV.....174

Fetish.....184

Dialogue as Internalization of the Other.....189

The Text as Talisman.....199

Conclusion.....211

Chapter 5

Fictions of Witness.....213

Bearing Witness.....220

AIDS Fiction’s Shifting Audience.....223

AIDS Fiction as Pedagogical.....227

The Quilt.....231

“America has AIDS”236

Heterosexual Male Narrators.....238

Voyeurism.....244

Bathing and the Lesbian Witness.....255

Lesbian AIDS Fiction.....258

The Ill Other.....261

Family AIDS Fiction.....264

Conclusion.....280

Chapter 6

Conclusion.....282

Research Bibliography.....291

Fiction and Memoir Bibliography.....308

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The style I use is American, including American spelling, serial commas, punctuation inside quotation marks, and the use of double quotation marks, unless quoting within a quotation. The style follows what has become familiarly known as the Chicago Manual, which is, more formally: *A Manual of Style* (Chicago and London: The University of Chicago Press, 1969), Twelfth Edition.

Summary

This thesis examines the literary response to the AIDS crisis. It concentrates on literature produced between 1988 and 1995, published in English, and available in Britain and the United States.

The AIDS texts investigated here are representative of other AIDS literature produced during this time period in the way that they both enact and construct the identities of those affected by AIDS. Mourning and melancholia are the operative responses revealed in the literature, and revealed as the formative components of changing identities in response to AIDS and its manifestations.

The thesis is structured in six chapters: a theoretical introductory chapter that proposes mourning and loss as pre-existing concerns in gay men's literature, followed by a chapter addressing gay AIDS fiction and its narrative response to mourning. The next two chapters examine hybrid texts, that is, AIDS texts that do not conform to a conventional narrative form, and that are connected more firmly to a queer sensibility than to a gay identity. These texts, the thesis claims, are engaged with the processes (and resistances) of melancholia rather than with the work of mourning. The subsequent chapter addresses fictions of caretaking and witnessing, that is, novels written from the point of view of one who is caring for an other ill with AIDS. These are identified as more mainstream texts as they involve representations that are not connected to declared sexual identities and therefore mean to address a wider audience and to work out a more public discourse of grief around AIDS. In conclusion, the thesis suggests that although AIDS literature is involved in an effort to resist loss through narrative form, in fact it is the literature that in some instrumental ways makes the work of mourning and melancholia in response to AIDS productive rather than debilitating.

And alien tears will fill for him
Pity's long-broken urn,
For his mourners will be outcast men,
And outcasts always mourn.

Epitaph on the grave of Oscar Wilde in Père Lachaise
cemetery, from "The Ballad of Reading Gaol"

Chapter 1

Introduction

This thesis examines the literary response to the AIDS crisis. It concentrates on literature produced between 1988 and 1995, written in English, predominantly American, and published, primarily, in Britain and the United States.¹ Much of the literature on AIDS written in English, particularly fiction, and particularly gay AIDS literature, is published simultaneously, or very nearly simultaneously, in America and in Britain. Though the gay community is often understood to be transnational, sharing common features across the globe, Britain and the United States share certain affinities based on language, and though shifts in culture and identity do not necessarily coincide, many of the shifts and trends that occur in one country--especially in the United States--are often taken up shortly afterwards in the other. Because I am looking particularly at the literature of AIDS, and not at gay or AIDS cultures, this thesis pursues an understanding of the ways that literary constructions of identity--particularly, but not exclusively, gay identity--have shifted in the time of AIDS, as compelled by and in reaction to the literature of AIDS.

The extant criticism on the literature of AIDS is slim. The first article, to my knowledge, to emerge on the literature of AIDS appeared in 1988, the year that I begin my study of AIDS literature.² At that time the author considered that the “best literature on AIDS is found in the theater” while much of AIDS writing “is raw, unpolished, angry, contentious.”³ The writing on AIDS is scant enough up to that

¹ There is one exception, namely a novel in translation from French, but still widely available in Britain and in the United States.

² Shaun O’Connell, “The Big One: Literature Discovers AIDS,” in Padraig O’Malley, *The AIDS Epidemic: Private Rights and the Public Interest* (Boston: Beacon Press, 1989). First appeared as a special issue of the *New England Journal of Public Policy*, Vol. 4, no. 1 (Winter/Spring 1988).

³ O’Connell, p. 490.

point for Shaun O'Connell's essay to consider all forms of literature: plays, novels, short stories, journalism, and poetry. In 1992, along with an article in a collection of writing on Art and AIDS, came the first edited collection on the literature of AIDS.⁴ Two more collections followed in 1993.⁵ One can find articles on the literature of AIDS appearing regularly now in the late 1990s in *The Harvard Gay and Lesbian Review* and also in a magazine dedicated to the art of AIDS, called *Art and Understanding*; there are also regular reviews of AIDS literature in the gay press--that is, periodicals dedicated to a gay readership--such as *The Advocate*, in the United States, and *Gay Times*, in Britain.

The first book-length work on AIDS literature appeared in 1996. Steven Kruger's book on AIDS narratives focuses on the ways that the scientific discourse on AIDS has shaped narrative conceptions of AIDS, including fictional narratives.⁶ It concentrates on the metaphors used to understand AIDS, especially scientific and, in particular, immunological metaphors, and how those metaphors have informed the way AIDS can be narrativized in journalism, politics, and literature. It is also concerned with the way literature, especially fiction, can work to subvert the dominant discursive language of AIDS, showing how "novels themselves may help shape broader cultural understandings of the complex and conflicted phenomenon of AIDS."⁷

⁴ James Miller, "AIDS in the Novel: Getting It Straight," in Miller, ed., *Fluid Exchanges: Artists and Critics in the AIDS Crisis* (Toronto, Buffalo, NY, and London: University of Toronto Press, 1992); Emmanuel S. Nelson, ed., *AIDS: The Literary Response* (Ontario and New York: Twayne Publishers, 1992).

⁵ Judith Laurence Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* (Urbana and Chicago: University of Illinois Press, 1993); Timothy F. Murphy and Suzanne Poirier, eds., *Writing AIDS: Gay Literature, Language, and Analysis* (New York: Columbia University Press, 1993).

⁶ Steven F. Kruger, *AIDS Narratives: Gender and Sexuality, Fiction and Science* (New York and London: Garland Publishing, 1996).

⁷ Kruger, p. 4.

Like Kruger's investigation into the ways that social apprehensions of AIDS are reconstructed into narratives, my work is also concerned with the narrativization of AIDS, though not with the metaphors, scientific or otherwise, with which AIDS is narrativized. Rather, my thesis is a psychoanalytic investigation of the literature of AIDS and of how the literature, through the mechanisms of mourning, melancholia, and identification both forms and reveals shifting identities in response to AIDS. Rather than concentrate, as Kruger does, on how narratives of AIDS are shaped in their formulation by mis- and preconceptions of familiar and loaded metaphors of AIDS, science, gender, and homosexuality, my work concentrates on how AIDS narratives reflect, construct, and often reconstruct, the perceived changes in subjectivity among a community of readers as refracted through grieving and its narrative representations. While I claim that the literature of AIDS is a response to grief, that is, it is part of the work of mourning itself, I also pursue the ways that the literature charts changes in the identities and identifications of those who are writing and those who are reading this literature.

Time Span and History

In much the same way that Gregory Woods identifies an "age of antibiotics," as the time when, after 1941, particularly for men, "sex became safe,"⁸ and as a time that especially influenced the gay male literature produced in the 1970s, so also do I want to draw attention to the period of AIDS writing that I have chosen to examine--largely, but not exclusively gay--as circumscribed in some significant ways by pharmaceuticals. I have chosen the years 1988 to 1994 as the period in which my

⁸ Gregory Woods, *A History of Gay Literature: The Male Tradition* (New Haven and London: Yale University Press, 1998), p. 338.

investigation of AIDS literature is delimited because it begins at a point after the initial unformed literary cries of anguish and desperation of AIDS writing, at just the moment when a more solid literature of AIDS is emerging, and ends just prior to the point when in the Western world, particularly in the United States, a new class of drugs called protease inhibitors begins to change the relationship that gay men, both those afflicted by AIDS and its illnesses and those affected by AIDS in myriad other ways, have to death. Because of the advent of protease inhibitors and the discovery that they can be used in combination (in what is called combination therapy) to combat the virus in a way that none of them do singly, it is understood (often erroneously) that it is no longer the case that the illnesses associated with AIDS are fatal illnesses. Though they are not a cure, and though there were some individuals who were already “long-term survivors” without the intervention of antiviral intervention, the emergence of the drug cocktails made up of protease inhibitors has changed the responses and attitudes to AIDS. What has changed is that, although it is not universally the case, it is no longer thought to be an automatic equation that AIDS equals death or loss.⁹ What the protease inhibitors are able to do is to make the virus in the body undetectable. They do not eradicate HIV. However, they often do render the person with AIDS healthier and prolong the lives of those whose prognoses would have been, pre-protease inhibitors, much shorter. The availability of these drugs has changed the relationship between AIDS and death, particularly in the attitudes and reactions toward AIDS among American and English readers. So strong is the general understanding that the advent of protease inhibitors has signaled the denouement of

⁹ A diagnosis of HIV infection “no longer signifies death. It merely signifies illness.” Andrew Sullivan, “When AIDS Ends,” *The New York Times Magazine*, November 10, 1996, p. 54.

the AIDS crisis that journalist Andrew Sullivan announced in *The New York Times* (albeit not without controversy) the “end of AIDS.”¹⁰

It was first recognized in New York and in San Francisco in early 1981 that young men, most of whom identified as gay, were beginning to manifest similar and unexplainable symptoms, and then dying quickly.¹¹ First termed GRID, for “gay-related immune deficiency,” the syndrome was defined and given the name AIDS by the U.S. Centers for Disease Control in 1982 (“[w]hen it was revealed that members of other groups--hemophiliacs, Haitian immigrants, recipients of blood transfusions, intravenous drug users, the sex partners (and sometimes children) of those carrying the virus, and millions of heterosexual men and women in Asia, Africa, and Latin America--were also infected”¹²). This was also when the first article appeared in *The New York Times*, bringing to widespread attention the rare cancers discovered in homosexual men.¹³ The gay press, however, was already reporting on the illnesses among gay men.¹⁴

¹⁰Sullivan, p. 58. See also Dan Savage, “The AIDS Crisis is Over,” *The Village Voice*, February 25, 1997, pp. 34-39.

¹¹It is Randy Shilts’ book *And the Band Played On* that contains the most thorough, if dramatized, history of AIDS from the time when it was first recognized to 1986 (New York: St. Martin’s Press, 1987). The history from there is ably taken up by Elinor Burkett in her book *The Gravest Show on Earth: America in the Age of AIDS* (New York: Picador, 1995). The effect of AIDS on women in the United States is taken up by Gena Corea in her book *The Invisible Epidemic: The Story of Women and AIDS* (New York: HarperCollins, 1992). The book that traces the history specifically in Britain is Simon Garfield’s *The End of Innocence: Britain in the Time of AIDS* (London: Faber and Faber, 1994).

¹²Neil Miller, *Out of the Past: Gay and Lesbian History from 1869 to the Present* (New York: Vintage Books, 1995), p. 440.

¹³Lawrence K. Altman, “Rare Cancer Seen in 41 Homosexuals,” *The New York Times*, July 3, 1981, p. A20.

¹⁴See, for example, Larry Kramer’s article “A Personal Appeal” that appeared in the *New York Native*, in the issue of August 24, 1981. Cited in Neil Miller, p. 441. See, also, David Román, *Acts of Intervention: Performance, Gay Culture, and AIDS* (Bloomington and Indianapolis: Indiana University Press, 1998), where he documents the fact that the “first article in the gay press to refer to what we now know as AIDS was reported in the May 18, 1981, edition of the *New York Native*” (p. xviii).

A crucial moment in the history of the AIDS epidemic was the start of the Gay Men's Health Crisis in 1981, initially a grassroots organization in New York City dedicated to educating the gay community, caring for those who were ill, and bringing more attention to the illness. It became the model for other AIDS service organizations in the United States and in Europe. A turning point in public recognition of the AIDS epidemic is indicated by Neil Miller's claim that "[w]hen actor Rock Hudson died of AIDS in 1985, there was a shift in the national attitude toward the disease."¹⁵ It was only after Hudson died that the U.S. president, five years into the crisis, delivered his first speech on AIDS. It was partly this sense of neglect by government officials responsible for allocating resources and of life-threatening delays on the part of the Federal Drug Administration who oversaw the pipeline for experimental AIDS drugs that escalated grassroots reaction and incited AIDS activism.

In March 1987, a speech by Larry Kramer at the Lesbian and Gay Community Center in New York City instigated the formation of ACT UP, the AIDS Coalition to Unleash Power, a grassroots AIDS activist organization. This kind of confrontational grassroots activism galvanized media attention to AIDS in America, for which ACT UP was an exponent and model, garnering immediate and widespread public attention to the crisis. As Andrew Sullivan has commented, the "combination of nearing death and political activism makes for a unique phenomenon."¹⁶

Nonfiction literature played a part early on in the history of grassroots AIDS prevention work. Michael Callen and Richard Berkowitz produced the book *How to Have Sex in an Epidemic* in 1983, the first publication to respond cogently and

¹⁵Neil Miller, p. 451.

¹⁶Andrew Sullivan, "Gay Life, Gay Death," *The New Republic*, December 19, 1990, p. 24. Quoted in Neil Miller, p. 458.

prudently to the crisis at hand without alarm or advising draconian anti-sex measures. It was through print and an increasing sense of reliance on literature among a growing and changing gay population that a gay community coalesced and redefined itself and spread word about ways to protect oneself and others from illness and take care of oneself if one became ill. Print has been one of the primary media for AIDS representation. For example, consider this reaction to the abundance of the available printed material on AIDS:

Anyone interested in AIDS must suffer from...vertigo: the number of books, essays, pamphlets, and articles, the kinds of information, issues, and events that occur are so overwhelming in sheer number as to defeat any attempt at comprehensive incorporation by one person; the ever-increasing number of written responses to the history of representation of the disease makes it impossible even to survey recent literature much less to comprehend the totality of discourse about HIV since its appearance as GRID in January 1982.¹⁷

In other words, if “AIDS has effected what amounts to an epistemic shift in gay culture,”¹⁸ a large part of this change has been engendered and chronicled by the printed word.

The year 1988 is significant for AIDS literature. It is the year that noted gay writers published their first works of AIDS literature. Paul Monette’s *Borrowed Time*¹⁹ and Edmund White and Adam Mars-Jones’ collection of AIDS short stories *The Darker Proof*²⁰ were published in 1988, marking the beginning of a serious and lasting AIDS literature. It was also in 1988 that other previously known gay novelists

¹⁷Thomas E. Yingling, *AIDS and the National Body*, Robyn Wiegman, ed. (Durham and London: Duke University Press, 1997), p. 37.

¹⁸José Arroyo, “Death, Desire and Identity: The Political Unconscious of ‘New Queer Cinema’” in Joseph Bristow and Angelia R. Wilson, eds., *Activating Theory: Lesbian, Gay, Bisexual Politics* (London: Lawrence and Wishart, 1993), p. 92.

¹⁹Paul Monette, *Borrowed Time: An AIDS Memoir* (New York: Harcourt Brace Jovanovich, 1988).

²⁰Edmund White and Adam Mars-Jones, *The Darker Proof: Stories from a Crisis* (New York: Plume, 1988).

published their first pieces of AIDS fiction, including Christopher Bram's *In Memory of Angel Clare*,²¹ Robert Ferro's *Second Son*,²² and Ethan Mordden's *Everyone Loves You*.²³ This was AIDS literature emerging from already known and important gay writers.

The first AIDS fiction, by and large, was gay fiction. This is changing, but it is not changing very quickly or very drastically. While the publication of memoirs of loved ones (or oneself) ill and then dead from AIDS continues,²⁴ the fiction written by or about other communities affected by AIDS is still sparse and infrequent. There started to appear nonfiction memoirs of a sort, or accounts of loved ones fallen to the illness, in the 1980s,²⁵ but except for Alice Hoffman's novel *At Risk*, most AIDS fiction produced in the 1980s was (and even most AIDS fiction produced now is) written by gay men about gay men. There was almost no literature produced by other afflicted groups, like intravenous drug users and women. In 1990 Fran Peavey's

²¹Christopher Bram, *In Memory of Angel Clare* (New York: Donald I. Fine, 1988).

²²Robert Ferro, *Second Son* (New York: Crown, 1988).

²³Ethan Mordden, *Everyone Loves You* (New York: St. Martin's Press, 1988).

²⁴Some examples include the memoir of his hemophiliac son who dies of AIDS, Bruce Courtenay's *April Fool's Day: A Modern Tragedy* (London: Mandarin, 1993); a doctor's account of his AIDS patients, Abraham Verghese's *My Own Country: A Doctor's Story* (New York: Vintage, 1994); Orville J. Messenger and Dorothy R. Messenger, *Borrowed Time: A Surgeon's Struggle with Transfusion-Induced AIDS* (Oakville, Ontario and Buffalo, NY: Mosaic Press, 1995); a woman's story of her husband's illness, Marion Wink's *First Comes Love* (New York: Pantheon, 1996); and a lesbian's account of her friend and colleague's demise from AIDS, Amy Hoffman's *Hospital Time* (Durham and London: Duke University Press, 1997).

²⁵One of the earliest I can find is June Callwood, *Jim: A Life with AIDS* (Toronto: Lester & Orpen Dennys Publishers, 1988). It is a memoir of "Canada's longest-surviving AIDS patient," by "one of Canada's best-known journalists." In the "Annotated Bibliography" in Pastore there is listed the following memoir: Beverly Barbo, *The Walking Wounded: A Mother's True Story of Her Son's Homosexuality and His Eventual AIDS-related Death!* (Lindsborg, KS: Carlsons, 1987), p. 255. (This book is annotated slightly differently as a "mother's firsthand report on her experience with two sons with AIDS" in the "Annotated Bibliography" in Murphy and Poirier, p. 332.) An even earlier example, cited in Pastore, is Barbara Peabody, *The Screaming Room: A Mother's Journal of Her Son's Struggle with AIDS* (New York: Avon, 1986).

memoir of living with AIDS was published,²⁶ and in the same year one extraordinary exception to the limited production of literature by both women and drug users appeared, though it is from a small publisher and little known: an AIDS memoir of a user of intravenous drugs who contracts AIDS, by Rae Shawn Stewart called *Letters From a Little Girl Addict*.²⁷ The first fiction, to my knowledge, that concerns women drug users is Achy Obejas' *We Came All the Way From Cuba So You Could Dress Like This?*²⁸ in which a story called "Man Oh Man" is told from the perspective of a female intravenous drug user, presumably with AIDS, about her boyfriend and about shooting up drugs. Many of the other stories in this collection are also about having AIDS and include lesbian characters, many Latina, a rare amalgamation of identities for AIDS literature, even now. During these years the primary "literature" produced by women consisted in short personal accounts of their lives and how they contracted AIDS.²⁹ The AIDS fiction by or about women and drug users is still sparse.

One can surmise that the reasons why women and drug users were not able to produce literature in the way that gay men were have to do with a dearth for women and drug users of both cultural and financial resources and also, in the earlier years of the epidemic, the great disparity in prognosis for men and for women once diagnosed; that is, gay men lived up to three times longer than did women after diagnosis.³⁰

²⁶Fran Peavey, *A Shallow Pool of Time: An HIV+ Woman Grapples with the AIDS Epidemic* (Philadelphia, PA and Santa Cruz, CA: New Society Publishers, 1990).

²⁷Rae Shawn Stewart, *Letters From a Little Girl Addict* (Los Angeles, CA: Holloway House, 1990).

²⁸Achy Obejas, *We Came All the Way From Cuba So You Could Dress Like This?* (Pittsburgh: Cleis Press, 1994).

²⁹See, for example, Ines Rider and Patricia Ruppelt, eds., *AIDS: The Women* (San Francisco: Cleis Press, 1988); Sue O'Sullivan and Kate Thomson, eds., *Positively Women: Living With AIDS* (London: Sheba Feminist Press, 1992); and Andrea Rudd and Darien Taylor, eds., *Positive Women: Voices of Women Living With AIDS* (Toronto: Second Story Press, 1992).

³⁰See Risa Denenberg, "Unique Aspects of HIV Infection in Women," in The ACT UP/New York Women and AIDS Book Group, *Women, AIDS, and Activism* (Boston:

Remarking on this phenomenon, Richard Goldstein comments on the dearth of AIDS writing other than gay AIDS writing:

No comparable process of self-expression exists among the other groups hit hardest by AIDS--IV drug users, their children, and their mostly black or Hispanic partners--in part because of the paralyzing impact of poverty and stigma among these groups, in part because there is no "community," perceived as such, to bind drug users together.³¹

In Shaun O'Connell's early assessment of AIDS literature, he concludes that the "AIDS crisis has already produced a considerable body of literature, though not yet a great work of art."³² The earliest AIDS fiction, books like Paul Reed's *Facing It*, which is believed to be the first AIDS novel,³³ was desperate and often more invested in instruction than aesthetics. Almost none of these novels is still in print.³⁴ Michiko Kakutani, book critic of *The New York Times*, writes of early AIDS fiction:

In the beginning so little was widely known about the disease that writers seemed to feel an urgent need to teach, to remonstrate, to somehow convey raw facts. The disease had to be named and described so it could be fought, and early works of fiction tended almost by necessity to be polemical and didactic. Since then, novels and plays alike have grown both more personal and more abstract.³⁵

I start my investigation in 1988 because it is the year in which novels were published that, I argue, will be formative of the canon of AIDS literature, after the fledgling and desperate first attempts to write about the experiences that AIDS gave rise to, when

South End Press, 1990), especially the section "Why Do Women Die Faster than Men?" pp. 32-33.

³¹Richard Goldstein, "The Implicated and the Immune: Responses to AIDS in the Arts and Popular Culture," in Dorothy Nelkin, David P. Willis, and Scott V. Parris, eds., *A Disease of Society: Cultural and Institutional Responses to AIDS* (Cambridge and New York: Cambridge University Press, 1991), p. 19.

³²O'Connell, p. 502.

³³Paul Reed, *Facing It: A Novel of A.I.D.S.* (San Francisco: Gay Sunshine Press, 1984).

³⁴Even the publisher, Knights Press of Stamford Connecticut, which produced much of this early AIDS fiction, no longer exists.

³⁵Michiko Kakutani, "For Gay Writers, Sad Stories," *The New York Times*, March 12, 1993, p. C1.

AIDS was already beginning to be understood among certain communities of gay men to be an interwoven element of everyday life and society and not the unprecedented, tragic, and expeditiously fatal malady that it was in the early to mid-eighties.³⁶ It was still tragic, but it was no longer new. One of the only significant pieces of literature to appear before that year, except for some short stories in small gay periodicals, such as *Christopher Street* and *The James White Review*, and a few in the first of George Stambolian's *Men on Men* series,³⁷ is Susan Sontag's short story "The Way We Live Now," published in *The New Yorker* in 1986.³⁸ It was as though before 1988 there was a hesitation to respond to AIDS with fiction. As Andrew Holleran commented in his 1988 collection of essays, the "truth was quite enough; there was no need to make it up. To attempt to imagine such scenes seemed impertinence of the worst kind."³⁹ As Kakutani indicates in her comments on early AIDS writing, the earliest AIDS fiction was didactic, more journalistic than literary in style and intention.

One of the significant ways that the literature of AIDS changes after 1994 is that it becomes retrospective. For example, the first "epics" of gay literature were produced at nearly the same time. Consider that in 1995 two important gay writers produced such epics: Felice Picano's *Like People in History* and Ethan Mordden's *How Long Has this Been Going On?*⁴⁰ both of which chronicle gay life in major cities

³⁶While enduring AIDS literature from before 1988 is hard to find, there are, interestingly, a few plays from 1985 that are memorable and important and sometimes still produced, the most significant of which are probably William Hoffman's "As Is" and Larry Kramer's "The Normal Heart." Both these dramas are anthologized in M. Elizabeth Osborn, *The Way We Live Now: American Plays and the AIDS Crisis* (New York: Theatre Telecommunications Group, 1990).

³⁷The first volume of the *Men on Men* series appeared in 1986, with three stories about AIDS: "An Oracle," by Edmund White; "Friends At Evening," by Andrew Holleran; and "Nothing Ever Just Disappears," by Sam D'Allesandro. George Stambolian, ed., *Men On Men: Best New Gay Fiction* (New York: Plume, 1986).

³⁸Susan Sontag, "The Way We Live Now," *The New Yorker*, November 24, 1986.

³⁹Andrew Holleran, *Ground Zero* (New York: Plume, 1988), p. 13.

⁴⁰Felice Picano, *Like People in History* (New York: Penguin, 1995); and Ethan

from some time just before Stonewall to the time of writing. They provide a grand sweep of historical events and trends culminating in the losses incurred from AIDS.⁴¹ That there should now be historical novels of gay life implies some sort of closure, or at least transition in narrative and experience--a transition to what, is still uncertain, though certainly to a life that incorporates, but no longer dwells on, the losses incurred by AIDS. There is a gay history now, the appearance of gay epics such as these seems to imply, an era which closes with the advent of the AIDS epidemic.

AIDS writing also becomes retrospective in another way, and that is in the appearance of anthologies of AIDS writing. Anthologies often signal the end of an era. Take Sharon Oard Warner (whose anthology of AIDS short stories I consider more closely in Chapter 5), and Marie Howe and Michael Klein's anthology of American AIDS writing.⁴² Both published in 1995, these anthologies appear in the year following the span of works I take up in this thesis, when the literature was beginning to be anthologized for yet a different reading public, one who might not have sought out the individual books as they were originally published. The year 1995 also shows a change in AIDS literature from one that is primarily mournful to another stage that is, I suggest, more about anger and anomie. This is shown in the appearance of unlikable, or "difficult," characters who have AIDS. Consider, for

Mordden, *How Long Has this Been Going On?* (London: Quartet Books, 1995).

⁴¹An interesting "epic" in this context is Armistead Maupin's six volumes of the *Tales of the City*. It is interesting because it is a series of novels that appeared originally as a sequence of fictional episodes in the newspaper *The San Francisco Chronicle*. The beginning of the narrative precedes the appearance of AIDS and comes to incorporate AIDS into the tales as the epidemic emerges and evolves. The first volume of the *Tales of the City* was published in 1980 but is comprised of the series of stories that appeared in *The San Francisco Chronicle* in 1978. Following are the titles in the series and their year of copyright: *Tales of the City* (1978), *More Tales of the City* (1980), *Further Tales of the City* (1982), *Babycakes* (1984), *Significant Others* (1987), and *Sure of You* (1989), all published in New York by Harper and Row.

⁴²Marie Howe and Michael Klein, *In the Company of My Solitude: American Writing from the AIDS Pandemic* (New York: Persea Books, 1995).

example, the novel *Walking on Air* by R.S. Jones, which represents a shift in AIDS writing in that the tone is not melancholy but dispassionate.⁴³ In *Flesh and Blood*, a novel by the major gay writer Michael Cunningham published in 1995, the narrative is unusual for allowing the primary gay character to remain free from AIDS, while it is a primary female character who becomes infected.⁴⁴

Geography, Language, and Community

For reasons similar to those that led me to choose that particular time span of literature, I have chosen to focus on literature produced in the United States. This was where the first literary approaches to AIDS in the English language were produced, and where the advent of protease inhibitors first made their claim and had the effect of genuinely prolonging the lives of those who were not yet in the late stages of affliction.

It is also the country, as I consider in the chapter that deals with a more mainstream AIDS literature, in which AIDS haunts a “general public” that can, but also often cannot, sustain the impression that AIDS does not affect them. It is a country where the fear of AIDS and of those perceived to be especially at risk for AIDS is acute and the responses often reactionary.

Edmund White notes that it is in the “English-speaking world” that the gay community has experienced the strongest literary response to the AIDS crisis.⁴⁵ I am looking at literature in English because I am interested most in the audience that will have access to the texts in English. That is, primarily an American, but also a British

⁴³R.S. Jones, *Walking On Air* (New York: Houghton Mifflin, 1995).

⁴⁴Michael Cunningham, *Flesh and Blood* (New York: Farrar, Straus and Giroux, 1995).

⁴⁵Edmund White, ed., Foreword, *The Faber Book of Gay Short Fiction* (Boston and London: Faber and Faber, 1991), p. xiii.

readership. It is precisely the “strong literary response” that has most strenuously formulated a community of readers of AIDS literature.

Although one can trace the beginnings of the homosexual novel to the 1880s when “a number of fictional works with major or minor male homosexual themes began to be published in the U.S.,”⁴⁶ there is some consensus that gay writing and publishing had its advent in the score of years before the Stonewall riots that signaled the beginning of what we now think of as “gay liberation,” and that the small industry began to flourish in the 1970s, just after the shifts in politics and identity surrounding this event.⁴⁷ The year 1978 is generally cited as the historical moment when gay literature as we now know it started to flourish.⁴⁸ The growth of gay and lesbian writing and publishing--a veritable boom in the 1980s--coincided with the AIDS crisis.⁴⁹

The proliferation of AIDS literature has revealed the importance of the written word for gay men and for the formulation and sustenance of their identity as gay.

⁴⁶Jonathan Katz, *Gay American History: Lesbians and Gay Men in the U.S.A.* (New York: Thomas Y. Crowell Company, 1976), p. 657.

⁴⁷See David Bergman, “The Gay American Novel,” *The Harvard Gay & Lesbian Review*, Vol. 2, no. 2, Spring 1995, p. 13; Michael Bronski, *Culture Clash: The Making of a Gay Sensibility* (Boston: South End Press, 1984), pp. 144-145; Bergman, Introduction, in Bergman, ed., *The Violet Quill Reader: The Emergence of Gay Writing After Stonewall* (New York: St. Martin’s Press, 1994), p. xiv; Edmund White, “The Joy of Gay Lit,” *Out*, No. 47, September 1997, p. 112; George Stambolian, ed., Introduction, *Men on Men 2: Best New Gay Fiction* (New York: Plume, 1988), p. 1; and Steven Seidman, “Transfiguring Sexual Identity: AIDS and the Contemporary Construction of Homosexuality,” *Social Text*, Vol. 19/20, Fall 1988, p. 187.

⁴⁸See Edmund White, “Out of the Closet, on to the Bookshelf,” *The Burning Library: Writings on Art, Politics and Sexuality 1969-1993*, David Bergman, ed. (London: Picador, 1995), p. 276; and David Bergman, *Gaiety Transfigured: Gay Self-Representation in American Literature* (Madison: The University of Wisconsin Press, 1991), pp. 9-10.

⁴⁹See Michael Denneny, “AIDS Writing and the Creation of a Gay Culture,” in Pastore, especially pp. 36 and 39; Stambolian, *Men on Men 2*, p. 2; Neil Miller, p. 476. See, also, Esther B. Fein, “Big Publishers Profit as Gay Literature Thrives,” *The New York Times*, July 6, 1992, pp. D1 and D6.

Indeed, gay men's "reliance on printed materials is reflected in the enormous volume and sophistication of the literature already published about AIDS."⁵⁰ However, literature was already fundamental in the formulation of a gay identity prior to AIDS. Literature has for a long time been a formative cultural influence on gay identity. Indeed, "for many people their sense of being gay relies intensely on literary representations."⁵¹ Insofar as "the arts have...served as an arena in which homosexuals can address--and redress--the inequities of their social status,"⁵² the gay community's "reliance on literature"⁵³ and other forms of cultural representation stems directly from gay men's experience of oppression:

like all marginalized minorities or (sub)cultures, gays and lesbians often found their cultural experience and participation constrained and proscribed by a dominant culture in which they are a generally ignored or oppressed, if logically integral, part.⁵⁴

But Richard Dyer explains that "[b]ecause, as gays, we grew up isolated not only from our heterosexual peers but also from each other, we turned to the mass media for information and ideas about ourselves."⁵⁵

Over and over in the critical reflection on literature and gay identity, the relationship between literature and a shifting gay identity in response to AIDS is cited as crucial. While the connection is not developed, it is often said, for example, that "[i]n the age of AIDS, literary representations of AIDS may be just as--if not more--valuable to the process of identity formation as was 'gay literature' before the

⁵⁰Bergman, *Gaiety Transfigured*, p. 9.

⁵¹Thomas Piontek, "Unsafe Representations: Cultural Criticism in the Age of AIDS," in Cheryl Kader and Thomas Piontek, eds., *Discourse*, Vol. 5, no. 1, Fall 1992, p. 136.

⁵²Goldstein, p. 19.

⁵³See Bergman, *Gaiety Transfigured*, p. 9.

⁵⁴Corey K. Creekmur and Alexander Doty, Introduction, in Creekmur and Doty, eds., *Out in Culture: Gay, Lesbian, and Queer Essays on Popular Culture* (Durham, NC: Duke University Press, 1995), p. 1.

⁵⁵Richard Dyer, Introduction, in Dyer, ed., *Gays and Film* (London: British Film Institute, 1977), p. 1.

onset of the epidemic.”⁵⁶ It has been the printed word that has had what is often cited in commentary on gay literature to be the most profound and consistent influence upon the formulation of gay male identity in the twentieth century, particularly since the Stonewall riots, regarded as the inception of gay liberation. One critic writes that “[h]ungry for reflections of themselves and their lives that they couldn’t find at the movies or on TV, gays and lesbians continued to take their images from fiction”⁵⁷ and another that “literary representation...has been of greater importance for gay communities than for any other ethnic, national, or religious group.”⁵⁸ Such comments suggest that literature has been crucial for its reflection and representations of the gay community.

Gay literature has always reflected back gay culture to a gay reading public, often made up of individuals for whom gay fiction was the only aspect of community they experienced, especially while growing up. Coming out stories, narratives that chronicle the emergence of the individual into a gay identity, were crucial in this respect. Such narratives, then, were able to constitute for isolated individuals an imagined gay community. An “imagined community,” as Benedict Anderson has formulated it, is fashioned precisely by what it reads, even if it is only a small segment of the community that reads and disseminates the values and assumptions contained in the literature. Anderson considers the formation of national consciousnesses through the effects of “print-capitalism” and the stabilization of “print-languages,” which “created unified fields of exchanges and communication.”⁵⁹

Here the imagined community is established at the level of representation through a

⁵⁶Piontek, p. 136.

⁵⁷Neil Miller, p. 476.

⁵⁸Bergman, *Gaiety Transfigured*, p. 9.

⁵⁹Benedict Anderson, *Imagined Communities: Reflections on the Origins and Spread of Nationalism* (London and New York: Verso, 1991), p. 44.

culture of the printed word that is structured through reading and the imagined social space it produces. Stuart Hall has similarly highlighted the importance of a shared culture in constituting national identities: “national identities are not things we are born with, but are formed and transformed within and relation to *representation*.”⁶⁰ But marginal as well as dominant subjectivities are formed and transformed in relationship to representation. For Alan Sinfield, gay culture works in this way:

Subcultures constitute *partially alternative subjectivities*. In that bit of the world where the subculture runs, you may feel, as we used to say, that Black is beautiful, gay is good. It is through such sharing--through interaction with others who are engaged with compatible preoccupations--that one may cultivate a workable alternative subject position.⁶¹

Although the gay community has often been seen in terms of an ethnicity, gay men do not have equivalent structures of kinship, family, or memory that enable the transmission of a gay history and identity.⁶² (“Consider,” Alan Sinfield poignantly exhorts, that “parents will repudiate their offspring because of gayness.”⁶³) Culture, for this reason, has been central in the constitution of gay identity:

As gay persons create a gay culture cluttered with stories of gay life, gay history and gay politics, so that very culture helps to define a reality that makes gay personhood tighter and ever more plausible. And this in turn strengthens the culture and the politics.⁶⁴

In the time of AIDS, when generations of gay men and their legacies have been lost, the transmission of a gay history and identity is even more crucially dependent on cultural production and consumption.⁶⁵

⁶⁰Stuart Hall, “The Question of Cultural Identity,” in Stuart Hall, David Held, Tony McGrew, eds., *Modernity and Its Futures* (Cambridge: Polity, 1992), p. 292.

⁶¹ Alan Sinfield, “Diaspora and Hybridity: Queer Identities and the Ethnicity Model,” *Textual Practice*, Vol. 10., no. 2, 1996, p. 287. Emphasis his.

⁶²See Sinfield, “Diaspora and Hybridity,” p. 280.

⁶³Sinfield, “Diaspora and Hybridity,” p. 277.

⁶⁴Ken Plummer, *Telling Sexual Stories: Power, Change and Social Worlds* (London: Routledge, 1995), p. 87, cited in Sinfield, “Diaspora and Hybridity,” p. 287.

⁶⁵ For further discussion on this point see Edmund White, Keynote Address, 1996

Grief and the Gay Community

If it is, as I have argued, literature that is in significant part formative of the imagined gay community, it is also, I want to suggest, precisely the sadness in the literature that is formative of the imagined gay community. It is easier to understand how grief can form a community when the mourning is more specific, that is, for example, when it is connected to the identifiable losses from AIDS. In the funeral process the “rite confirms in its every repetition the possibility of a ground for a shared intelligibility,” and it “secures for those who perform the ritual the guarantee of a common pathos, a common sense.”⁶⁶ The repetition of burials for the gay community during the time of AIDS has had the effect of cementing the community as a common community. The rite of burial, then,

is the instauration of community precisely because it separates we the living from the utterly abject dead. Mourning becomes *Bildung*, a process continually reenacted, which in its reenactments produces the image of cultural community.⁶⁷

However, though AIDS has brought about massive loss in the gay community, the period since the advent of AIDS is not the first time that the gay community has formulated itself as such around loss. It is the grief, mourning, and letting go that pre-exists AIDS, as found in the literature, primarily after Stonewall and before AIDS, that constitutes, and has constituted, the gay community as such.

OutWrite Conference, Boston, transcribed as “Remembrances of a Gay Old Time,” *The Harvard Gay and Lesbian Review*, Vol. 3, no. 3, Summer 1996, pp. 7-10.

⁶⁶William Haver, *The Body of This Death: Historicity and Sociality in the Time of AIDS* (Stanford, CA: Stanford University Press, 1996), pp. 58-59.

⁶⁷Haver, p. 59.

The Legacy of Gay Literature and Loss

The appearance of AIDS among gay men was not the first time that homosexuality in men has been associated with loss, mourning, or death. One writer comments, for example, that “[p]arents’ fears that their children might become gay have symbolized various death fears,” and not only “that of biological death from AIDS,” but also “death of innocence, death of heterosexual identity, death of parental/adult authority, death of the natural order--even a feeling that a child turned gay might just as well be dead.”⁶⁸ There is a legacy of these associations that pre-exist AIDS and also seem to anticipate AIDS, a condition and a historical moment in which these associations are made corporeal by actual illness and death, by calls for mourning that now have (ill and dead) bodies connected with the underlying grief.

Gregory Woods begins the chapter on AIDS literature in his *History of Gay Literature* with a “sequence, in random order, of quotations and brief narratives relating to queers and death.”⁶⁹ “Gay culture,” Woods demonstrates with his sequence, “has been acquainted with death for a long time.”⁷⁰ AIDS literature has a legacy of loss in the gay literature that preceded it. If pre-AIDS gay literature “characterize[d]...doom as the specific fate of gay men”⁷¹ then AIDS literature when it emerged already had a context in which to portray loss and grief. Responding to Douglas Crimp’s article on AIDS and mourning and Crimp’s observation that “the dominant media still pictures us only as wasting deathbed victims,”⁷² Jeff Nunokawa

⁶⁸Les Levidow, “Witches and Seducers: Moral Panics for Our Time,” in Barry Richards, ed., *Crises of the Self: Further Essays on Psychoanalysis and Politics* (London: Free Association Books, 1989), p. 187.

⁶⁹Woods, *A History of Gay Literature*, p. 359.

⁷⁰Woods, *A History of Gay Literature*, p. 359.

⁷¹Jeff Nunokawa, “‘All the Sad Young Men’: AIDS and the Work of Mourning,” in Diana Fuss, ed., *Inside/Out: Lesbian Theories, Gay Theories* (New York and London: Routledge, 1991), p. 317.

⁷²Douglas Crimp, “Mourning and Militancy,” *October*, Winter 1989, Vol. 51, p. 16.

asserts that “the dominant media has *always* pictured gay people as ‘deathbed victims.’”⁷³ Because the short history of gay literature carried in almost every novel the “requisite unhappy ending,”⁷⁴ gay literature when AIDS came along was accustomed already to disappointment, longing, loss, and grief.

There is a legacy of gay literature, both before AIDS and since, in which a gay character dies unnaturally or prematurely: a veritable epidemic of gay deaths that are not due to AIDS.⁷⁵ The time of AIDS “was not the first time [gay men] had died for no good reason,”⁷⁶ Woods comments, and he goes on to suggest that the mournfulness found in gay men’s literature is an anticipation of the prospective losses, reminding his readers that it “is easy to forget that a lot of writing from the Golden Age between Stonewall and AIDS was filled with foreboding.”⁷⁷ Even during the time of liberation “death persisted as a theme because gay men and women were now free to address the reality of the violence directed against them.”⁷⁸

It was not, however, only images and themes of death that preceded AIDS in perceptions of gay men and in gay literature, but loss more generally. The coming out story, the most popular and common gay literature before the time of AIDS, was

⁷³Nunokawa, p. 312. For further commentary on the association of gay men with death see Timothy F. Murphy, “Testimony,” in Murphy and Suzanne Poirier, eds., *Writing AIDS: Gay Literature, Language, and Analysis* (New York, Columbia University Press, 1993), and Ellis Hanson, “Undead,” in Diana Fuss, ed., *Inside/Out: Lesbian Theories, Gay Theories* (London: Routledge, 1991).

⁷⁴Bronski, p. 155.

⁷⁵For narratives of gay men falling ill, dying, or succumbing to violence before the time of AIDS consider, for example, this random selection: Harvey Fierstein, “Torch Song Trilogy” (gay bashing), Jane Rule, *Contract With the World* (suicide), Melvin Dixon, *Vanishing Rooms* (gay bashing), David Wojnarowicz, *Close to the Knives* (gay bashing), Martin Peck, *Martin and John* (gay bashing), Alan Hollinghurst, *The Swimming-Pool Library* (gay bashing).

⁷⁶Gregory Woods, “AIDS to Remembrance: The Uses of Elegy,” in Emmanuel S. Nelson, ed., *AIDS: The Literary Response* (New York: Twayne Publishers, 1992), p. 156.

⁷⁷Woods, “AIDS to Remembrance,” p. 156.

⁷⁸George Stambolian, *Men on Men*, p. 9.

about loss at the same time that it was about liberation. Coming out novels made up the majority of the fiction that emerged after Stonewall, the phrase indicating a breach of the “closet” in which one’s gay identity was kept hidden from straight society.

There are two ways in which the coming out story is the precursor to AIDS literature. One way--that I detail more closely in Chapter 2--is the legacy of realist literature in first person confessional narration. However, the second way in which the coming out tale precedes and foreshadows AIDS fiction, which I want to focus on here, is in its legacy of loss and mourning. While coming out stories are in some significant ways about the triumph of a gay identity over the disapproval of family, society, and friends, they are still very much about the yearning for and sacrifice of those entities.

“Coming out,” Edmund White explains, “is the rite that marks the passage from homosexual desire to gay identity.”⁷⁹ The novelist Dorothy Allison has remarked that the coming out story is “the essential homosexual theme, as persistent as the romantic love story and the coming-of-age novel.”⁸⁰ The coming out story is “the gay equivalent of the *Bildungsroman*,”⁸¹ the narrative of the coming of age of a gay youth and “invariably, an account of the move away from the family.”⁸²

While coming out novels proliferated during the time just before the emergence of AIDS, one of the most enduring and best known is Edmund White’s novel *A Boy’s Own Story*.⁸³ White’s novel is representative of, indeed can be said to be the quintessential, post-Stonewall, pre-AIDS gay male novel. White is considered to be among those novelists who “became the most important gay authors of the

⁷⁹Edmund White, *The Faber Book of Gay Short Fiction*, p. ix.

⁸⁰Quoted in George Stambolian, ed., Introduction, *Men on Men 3: Best New Gay Fiction* (New York: Plume, 1990), p. 7.

⁸¹Woods, *A History of Gay Literature*, p. 346.

⁸²Woods, *A History of Gay Literature*, p. 346.

⁸³Edmund White, *A Boy’s Own Story* (New York: Dutton, 1982). Subsequent references will be made parenthetically within the text.

decade, setting a standard for gay fiction against which the present boom in gay writing is always compared.”⁸⁴ The novel is typical of pre-AIDS gay literature in these ways: it is a bildungsroman, it is a coming out story (how a young man, in this case, grows up to be and comes to accept being gay), and it is sad, that is, already entrenched in the kind of loss and mourning that later will come to be exclusively associated with AIDS. Indeed I am suggesting that it is AIDS that allows this pre-existing, and mostly vague and inarticulable, sadness around unacceptance and loss of family bonds to be, finally, articulated.

The novel is a story of an unnamed boy growing up in the Midwest of America, probably in the 1950s, in which the narrator declaims throughout the novel his “disgust and longing” (p. 40) and his loneliness: “I most certainly had been lonely,” the narrator declares in an extraordinary image of the very tangibility of isolation, “I had ached and writhed with loneliness, twisting around and smearing it on me as though it were a tissue of shame pouring out of my body” (p. 110). White’s novel epitomizes a literature of utter desolation and sadness. It is a novel of a “childhood sunk into a cross-eyed, nose-picking turpitude of shame and self-loathing” (p. 126).

A Boy’s Own Story is among the first novels of its kind to describe the growing up of a boy who, although he is full of diffidence about his desires for men and other boys, is also largely without apology for his desires. The protagonist often expresses shame for his desires, but more often he expresses distress that they cannot be fulfilled. The pre-existing grief that I speak of is expressed nicely here when White’s narrator, as a young boy, pines for a man to love him: “I hypothesized a lover who’d take me away” he laments; “[h]is delay in coming went on so long that

⁸⁴Bergman, *The Violet Quill Reader*, p. xi.

soon I'd passed from anticipation to nostalgia" (p. 39). The grief of the coming out novels is tied to a longing that even before it can be defined is best articulated as a kind of nostalgia. The protagonist's lamentation does not cause him to want to overcome his homosexuality, though there is some of that inclination in the novel, but far more a continual capitulation to "the ache of waiting and the fear I wasn't worthy" (p. 40). "Everything I touched or did," the aggrieved narrator declares, "spoke to me of sadness" (p. 165).

In *A Boy's Own Story*, Edmund White creates a narrative of "the self-hatred that was forced on a young gay man by a society that could conceive of homosexuality only as a sickness, sin or crime."⁸⁵ White's statement here suggests that it is the reactions to these attitudes of society that make for the loneliness and grief in his novel, and by extension, I would add, the loneliness and grief of other novels of this period and of this kind. *A Boy's Own Story* is typical of other post-Stonewall, pre-AIDS coming out stories (though atypical, perhaps, in the superior quality of the writing) in that it charts the lonely existence of a gay adolescent who knows of no other gay men, no community of men like himself. It is precisely this sort of isolated existence, albeit ending with the recognition of community, that constitutes the longing and grief in the coming out novels of pre-AIDS literature that I am pointing to and offering as itself constitutive of a pre-existing mourning, as it were, among gay men before the advent of AIDS.

Another novel of growing up, David Leavitt's *The Lost Language of Cranes*,⁸⁶ while not published before AIDS chronologically, is set before AIDS in its awareness

⁸⁵Edmund White, "The Personal is Political: Queer Fiction and Criticism," in Bergman, ed., *The Burning Library*, p. 372.

⁸⁶David Leavitt, *The Lost Language of Cranes* (New York: Knopf, 1986). Subsequent references will be made parenthetically within the text.

and recognition of AIDS. It is the story also of a young gay man who must in his post-adolescent youth (Philip is twenty-five) come to terms with his sexuality in a world where he knows of no others like himself (though the interesting twist in this story is that his father also comes out as gay). “Philip longed for passion,” we read very early in the novel, and “[r]ejection seemed his lot in life” (p. 33). In a line that echoes similar sentiments of secretiveness in James Baldwin’s early novel *Giovanni’s Room*, which I will discuss shortly, Philip recalls that “[h]is sexual life had been bred in secret; he had never spoken of it with anyone, not even himself” (p. 77); he hoped that he “would be free of it, then, that other life, the secret life; it would fall away unknown to anyone but him, a husk, and he would look back on it as a distant dream” (pp. 77-78). Leavitt’s novel, like White’s, foregrounds a sadness--a loneliness and loss--that is particular to representations of the coming of age of young gay men, even before representations of the acute sadness in reaction to the losses incurred from AIDS.

While it is frequently claimed that gay men have a pre-existing relationship to death--that AIDS was by no means the first instance that homosexuality and death were consigned to the same association--I want also to claim, as an extension of this conception, that there is a pre-existing link therefore, not only between gay men and death, but between gay men and loss, disappointment, and grief. Certainly the presence of AIDS among such large numbers of those men who love men produced waves of loss and grief, but it is not the first time that gay men have felt mired in loss and consumed by grief. In fact, grief seems to have been, up to and including the time of “gay liberation” marked by the Stonewall Riots in 1969, the common disposition of men represented in the available literature from at least mid-century onwards, who

came to a consciousness of themselves as loving, pursuing, and wishing to be pursued by other men. Consider, for example, Gore Vidal's *The City and the Pillar*, James Baldwin's novel *Giovanni's Room*, and Christopher Isherwood's *A Single Man*, all pre-Stonewall novels predicated on themes of loss.

Gore Vidal's third novel (the "first serious American homosexual novel," declares Bernard Levin's assessment from *The Times* across the novel's cover), published in 1948, broke the mold, the author declares in a 1994 preface to the novel, of "American novels of 'inversion' [that] dealt with shrieking queens or lonely bookish boys who married unhappily and pined for Marines."⁸⁷ It does not follow, however, that this is a cheerful novel. The protagonist Jim Willard throughout the story is searching for his one perfect love, his "twin," with whom he shared a night of physical fusion ("[n]ow they were complete, each became the other, as their bodies collided with a primal violence, like to like, metal to magnet, half to half, and the whole restored" p. 32) before his lover, Bob Ford, departs their hometown to "travel and to hell around" (p. 29). The book opens on Jim in a seedy bar in the middle of the night, an ancient twenty-five years old, unsure what city he is in, drunk and without a place to sleep ("Drunk, he wanted to be drunker, without memory, or fear" p. 14). A secondary character in the novel, Sullivan, considers at one point that there was "an excellent chance that he would lose Jim, and the thought gave him a profound and bitter pleasure. He would suffer. He would know pain. With infinite care and patience, he set about destroying his own happiness" (p. 93). Though this novel offers no apologies, it is a story riven with longing and despair.

⁸⁷Gore Vidal, preface, *The City and the Pillar* (London: Abacus, 1994), p. 3. Subsequent references will be made parenthetically within the text.

In *Giovanni's Room*,⁸⁸ first published in 1956, James Baldwin presents an unapologetic, but still tragic, novel of ultimately renounced homosexual desire. At the beginning of the novel the protagonist David's forsaken lover Giovanni is "about to perish...on the guillotine" (p. 7), and the novel ends with a vividly imagined description of his execution at the very hour at which Giovanni is fated to die. As in *The City and the Pillar* and Isherwood's *A Single Man*, the homosexual novel must end with, or center on, death and renunciation. *Giovanni's Room*, too, fulfills this precept. During their brief interlude as lovers, David wonders "What kind of life can two men have together anyway?" (p. 208). His pleasure with Giovanni is always intertwined with despair:

In the beginning our life together held a joy and amazement which was newborn everyday. Beneath the joy, of course, was anguish and beneath the amazement was fear (p. 109).

Early in the novel David recalls a loving adolescent physical encounter with his close friend Joey, and can describe it only in terms of shame and death:

The incident with Joey had shaken me profoundly and its effect was to make me secretive and cruel. I could not discuss what had happened to me with anyone, I could not even admit it to myself; and, while I never thought about it, it remained, nevertheless, at the bottom of my mind, as still and as awful as a decomposing corpse (p. 23).

He describes the desire that arose in him then as "monstrous" (p. 12), and later with Giovanni, though his desire seems to him "not really so strange, so unprecedented" still "voices within me boomed, for shame! for shame! that I should be so abruptly, so hideously entangled with a boy" (p. 92). Though *Giovanni's Room* is extraordinary for portraying a sexual and romantic relationship between two men in the late 1950s, it still cannot resist the tragic ending inevitable to homosexual fiction that in this case

⁸⁸James Baldwin, *Giovanni's Room* (London: Michael Joseph, 1957). Subsequent references will be made parenthetically within the text.

depicts one man renouncing homosexual desire for a sterile heterosexual marriage and the other condemned to death.

Christopher Isherwood's novel, *A Single Man*,⁸⁹ published in Britain in 1964, is the story of one day in the life of George, a university professor, in the immediate aftermath of the death of Jim, his lover of many years. It is an important novel for being unself-consciously gay (or, homosexual) at a time when the only homosexual novels were novels of apology or else pornographic novels. Edmund White cites this book as the first homosexual novel that takes homosexuality for granted, without explaining or entreating a heterosexual audience to accept or understand.⁹⁰ Yet it is still a sad novel, a novel of grief, for it is a lament for the loss of a lifetime partner.

An aspect of what renders the story sad is George's inability to expose his grief. Rather than confide to his neighbors that Jim has died ("How dearly Mrs Strunk would enjoy being sad about Jim!" p. 22), he tells them only that Jim is visiting his parents on the East coast (George lives in California) and "he will be remaining in the East indefinitely" (p. 22).

On a day when "the overpowering sloth of sadness is upon him" (p. 95), shopping in a grocery store for his dinner, George considers that

This bright place isn't really a sanctuary. For, ambushed among its bottles and cartons and cans, are shockingly vivid memories of meals shopped for, cooked, eaten with Jim. They stab out at George as he passes, pushing his shopping-cart. Should we ever feel truly lonely if we never ate alone?" (pp. 94-95).

After this consideration George makes a dinner date with a woman he doesn't like in order not to have to eat alone and then immediately regrets having made the dinner date, thinking that he could have spent the evening at home. When he has considered

⁸⁹Christopher Isherwood, *A Single Man* (London: Minerva, 1991). Subsequent references will be made parenthetically within the text.

⁹⁰White, Keynote Address, 1996 OutWrite Conference, Boston.

rather romantically the evening he could have had at home alone he realizes that it is not possible without Jim:

At first glance this is an absolutely convincing and charming scene of domestic contentment. Only after a few instants does George notice the omission which makes it meaningless. What is left out of the picture is Jim, lying opposite him at the other end of the couch, also reading; the two of them absorbed in their books yet so completely aware of each other's presence (p. 96).

The significant absence in this book is not any conviction in a gay identity, but the loss involved in the fact that nobody else has known of his relationship with Jim, so therefore no one knows of George's grief. He is aggrieved and he is lonely in his grief. However, it is not a melancholy story, for by the end of the novel is an awareness of working through mourning, of finding a new lover, of that possibility of continuity ("It is Now that he must find another Jim. Now that he must love. Now that he must live" p. 155).

Having identified some of the associations with death and loss in gay writing prior to AIDS, in this thesis I am however attempting to go beyond identifying grief as something that is ligatured to gay writing. Although it might be the assumption that AIDS writing will be primarily gay, it is not only gay texts that I am looking at. My main project, in the gay, queer, and more mainstream texts that I am examining, is to uncover the specific psychoanalytic mechanisms of mourning and melancholia in the texts that function as a response to the losses and anxieties evoked by AIDS.

Mourning and Melancholia

Psychoanalysis becomes an appropriate approach to analyzing the cultural responses to AIDS, including fiction, when one starts to look, particularly, at the representations of grief, loss, and mourning. In discussions of mourning one cannot but have recourse

to Freud and psychoanalysis. Along with theorist Peggy Phelan, I find that “the most compelling explanations for the intricate working through of mourning come from psychoanalytic theory.”⁹¹ Freud’s 1917 essay “Mourning and Melancholia,” is “in this instance,” another commentator on mourning propounds, “the founding text.”⁹² In this essay Freud defines mourning as the reaction to loss, any kind of loss, whether it be of an individual one has loved or known, or an abstract ideal one has had to relinquish.⁹³ Mourning is a process that dissipates over time. Contemporary psychoanalysts agree that mourning is “a psychological process in which the individual, by repeated and painful remembering, slowly learns to bear and to work through a loss.”⁹⁴ Mourning is in every respect “normal,” and “although mourning involves grave departures from the normal attitude to life, it never occurs to us to regard it as a pathological condition.”⁹⁵ As Michael Moon comments, in “Freud’s essay...grieving and mourning are completable tasks; [they are] private psychological projects with teleological internal structures.”⁹⁶

Melancholia, on the other hand, is characterized as work that can never be completed; the “working through” of melancholia is never done. It can be understood

⁹¹Peggy Phelan, *Mourning Sex: Performing Public Memories* (London and New York: Routledge, 1997), pp. 4-5.

⁹²Naomi Schor, *One Hundred Years of Melancholy* (Oxford: Clarendon Press, 1996), p. 2.

⁹³Sigmund Freud, “Mourning and Melancholia” (1917) in Angela Richards, ed., James Strachey, trans., *On Metapsychology: The Theory of Psychoanalysis*, The Penguin Freud Library, Vol. 11 (London: Penguin, 1991), p. 252.

⁹⁴Margarete Mitscherlich-Nielson, “The Inability to Mourn--Today,” in David R. Dietrich and Peter C. Shabad, eds., *The Problem of Loss and Mourning: Psychoanalytic Perspectives* (Madison, CT: International Universities Press, 1989), p. 405.

⁹⁵Freud, “Mourning and Melancholia,” p. 252.

⁹⁶Michael Moon, “Memorial Rags” in George E. Haggerty and Bonnie Zimmerman, eds. *Professions of Desire: Lesbian and Gay Studies in Literature* (New York: The Modern Languages Association of America, 1995), p. 234.

as a “denial of the reality of loss,”⁹⁷ a refusal to accept loss and therefore an inability to complete the work of mourning. Although both mourning and melancholia, according to Freud, start out quite similarly and are largely indistinguishable, melancholia marks a pathological departure from mourning and is recognized by

a profoundly painful dejection, cessation of interest in the outside world, loss of the capacity to love, inhibition of all activity, and a lowering of the self-regarding feelings to a degree that finds utterance in self-reproaches and self-revilings, and culminates in a delusional expectation of punishment.⁹⁸

Freud makes a distinction between mourning, which is the working through of an identifiable loss until that lost object has been relinquished and eventually replaced, and melancholia, a pathological inability to work through a loss, to the point where the loss, though initially concrete, can be later unidentifiable, or thought to be standing in for an earlier, repressed, loss. Though Freud remarks that the causes of mourning and melancholia can be “the same for both conditions[,]...[i]n some people the same influences produce melancholia instead of mourning.”⁹⁹ However, as Juliana Schiesari points out, in a useful examination of Freud’s essay, the “distinction is drawn...to be almost immediately blurred,”¹⁰⁰ as the same traits, according to Freud, can be defining symptoms of mourning. Schiesari comments that “this difference between ‘pathological’ melancholia and ‘normative’ mourning turns out to be a function of mourning’s transparency.”¹⁰¹ That is, mourning escapes a classification as pathology only because it is so familiar to us and we can easily explain it, deriving as

⁹⁷Kathleen Woodward, “Freud and Barthes: Theorizing Mourning, Sustaining Grief,” *Discourse* 13.1, Fall-Winter 1990-91, p. 95.

⁹⁸Freud, “Mourning and Melancholia,” p. 252.

⁹⁹Freud, “Mourning and Melancholia,” pp. 251-252.

¹⁰⁰Juliana Schiesari, *The Gendering of Melancholia: Feminism, Psychoanalysis, and the Symbolics of Loss in Renaissance Literature* (Ithaca and London: Cornell University Press, 1992), p. 37.

¹⁰¹Schiesari, p. 37.

it does from a particular event, from, more specifically, a particular loss. Freud writes, that it “is really only because we know so well how to explain [mourning] that this attitude does not seem to us pathological.”¹⁰² Schiesari observes that there seems to be, when examined very closely, no “unifying principle behind the symptoms” of melancholia,¹⁰³ and Freud insists that melancholia is like mourning in most significant ways. When Schiesari writes that, “the difference between the two seems to depend on the excess of the affect, whose referential status remains unclear”¹⁰⁴ she is suggesting that melancholia is constituted sometimes only by a more severe reaction to loss, though along the same spectrum, than is mourning.

However, although the terms mourning and melancholia often refer to very similar experiences of loss, there are sharper distinctions to be drawn. In the normal course of mourning, according to Freud, there is a recognition that a libidinal attachment to the lost object must cease; there is initially an unwillingness to detach, even if another attachment beckons; and then there is finally a willingness to do so. In melancholia the loss is internalized, and it is not apparent or obvious what is so painful to the individual. Indeed, the loss is so internalized that often “one cannot see clearly what it is that has been lost.”¹⁰⁵ Internalized loss, in the melancholic, combines with diminished self-regard: “In mourning it is the world which has become poor and empty; in melancholia it is the ego itself.”¹⁰⁶ The melancholic symptoms of “self-reproaches and self-revilings [that] culminates in a delusional expectation of punishment,”¹⁰⁷ is the result of an ambivalence in melancholia that is

¹⁰²Freud, “Mourning and Melancholia,” p. 252.

¹⁰³Schiesari, p. 43.

¹⁰⁴Schiesari, p. 39.

¹⁰⁵Freud, “Mourning and Melancholia,” p. 254.

¹⁰⁶Freud, “Mourning and Melancholia,” p. 254.

¹⁰⁷Freud, “Mourning and Melancholia,” p. 252.

not found in mourning. The ambivalence is found in the “self-reproaches” to which the melancholic gives utterance, and it becomes evident that “the self-reproaches are reproaches against a loved object which have been shifted away from it on to the patient’s own ego.”¹⁰⁸ In other words, one is aggrieved that the other has died, but still one is filled with anger, even hatred, toward the other, sometimes for the very act of dying or leaving. In the working through of loss, one internalizes the lost other in a process known as identification or introjection or incorporation.¹⁰⁹ Freud writes that in the attempt to displace the “free libido” onto another object, which is part of the process of working through mourning, in melancholia the libido is “withdrawn into the ego.”¹¹⁰ When in the experience of loss the “shadow of the object” falls “upon the ego,” this serves to “establish an *identification* of the ego with the abandoned object.”¹¹¹ In the act of expressing anger toward the lost other, and finding of course that the other has gone--not to mention that one is reluctant to express such vituperation toward one over whom one is grieving--the anger is directed back toward the now internalized aspect of the lost other, and so emerges as self-deprecation and self-hate, sometimes so severe as to result in self-annihilation.

However, where Freud found that the ambivalent feelings directed toward the lost other are redirected onto the ego as angry self-deprecation, in the AIDS writing that I understand to be melancholic, I find that, rather than becoming “internalized as a self-critical or self-debasing disposition in which the role of the other is now

¹⁰⁸Freud, “Mourning and Melancholia,” p. 257.

¹⁰⁹In his 1917 essay Freud uses the terms identification and incorporation, but later will use the term introjection. See, for example, “Identification,” part VII of a longer essay called “Group Psychology of the Analysis of the Ego” (1921) in Albert Dickson, ed., James Strachey, trans., *Civilization, Society and Religion*, The Penguin Freud Library, Vol. 12 (London: Penguin, 1991), p.139.

¹¹⁰Freud, “Mourning and Melancholia,” p. 258.

¹¹¹Freud, “Mourning and Melancholia,” p. 258; emphasis in the original.

occupied and directed by the ego itself,”¹¹² the ambivalence is what allows and produces the literature itself. I explore this more closely in a section on the dialogic nature of the melancholic AIDS texts, where I consider how the writing itself is a result of the internalization of the lost other. What would be in Freud’s characterization the melancholic’s anger against the self, or self-destructiveness, is instead what allows, what becomes, the writing. It is this turn back to the self that produces literature. And it is why the literature itself is often ambivalent, as a way of sustaining the lost other and as an ongoing ambivalence about the mortality, the fate, of the self who writes.

In making this distinction about where ambivalence is located and how it is manifested, I am making a distinction between clinical and literary critical uses of Freud and psychoanalysis. Because the thesis is concerned with textual strategies that construct subjectivities and identities within the text, I am utilizing psychoanalysis as a tool of textual analysis. This means that the ways the psychoanalytic mechanisms of melancholia, for example, function within the texts will not always reflect the clinical symptoms and behaviors that Freud observed in his patients. One difference, for example, is that melancholia, while disabling in an individual, I find in the texts to be productive. Melancholia produces textuality as well as galvanizing shifts in cultural and personal identity. In this thesis I am especially concerned with how identities are constructed and changed by the psychoanalytic mechanisms that I find functioning within the texts.

Though the first three chapters of the thesis are concerned with literary constructions of gay and queer identities, they are not the only identities that have

¹¹²Judith Butler, *Gender Trouble: Feminism and the Subversion of Identity* (New York and London: Routledge, 1990), p. 58

undergone perceptible changes in the time of AIDS. In the chapter on the literature of witness I examine how heterosexual male relationships to gay men and family configurations have become re-articulated when AIDS is a factor in a relationship represented in fiction or narrative.

The books examined here were selected on the basis of their representativeness, that is, how acutely they embodied the traits of their genre. The AIDS literature investigated here is exemplary of other AIDS texts in the way that it both reveals and constructs the identities of those affected by AIDS in the time period prescribed. Mourning and melancholia are the operative responses revealed in the literature, and they are revealed as the formative components of changing identities in response to AIDS and its manifestations.

The thesis is structured in five chapters after this theoretical introductory chapter: after a chapter addressing gay AIDS fiction and its relationship to mourning, the next two chapters examine hybrid texts, that is, AIDS texts that do not conform to a conventional narrative form, and that are connected more firmly to a queer sensibility than to a gay identity. These texts are also involved more directly, I argue, with melancholia than with mourning because, in part, of their refusal to acknowledge the possibility of an end to mourning (one of Freud's primary stipulations for successful mourning was that it can be worked through and completed). The subsequent chapter addresses fictions of caretaking and witnessing, that is, novels written from the point of view of one who is caring for an other ill with AIDS. Each chapter relies on primary texts that I take to be representative of the form, and relies also on secondary texts that are used to provide grounding and background for the arguments in the chapter.

The “Pathology” of Melancholia

It can be said that melancholia is “ultimately failed, or unsuccessful, mourning,”¹¹³ and “the failure of [the] work of mourning, its incompleteness or unachievement, is therefore a pathological melancholia, that open wound or piercing which obviates the possibility for an absolute separation.”¹¹⁴ To ascribe a strict Freudian definition of melancholia to a gay or queer identity is to make assumptions about the self-destructiveness or inherent masochism of a gay identity that I do not endorse. While I want to argue that there are some AIDS texts, some written by gay men, that are melancholic, I recognize the danger of ascribing a pathology to the history of an identity, especially a gay identity, that has itself only recently been divested of the classification of mental illness. However, given the depths of grief occasioned by AIDS, it is useful to look at the standard accounts of how grief is evinced, namely, mourning and melancholia. While, as Schiesari notes, “[n]o study of melancholia can begin without a reconsideration of Freud’s essay,”¹¹⁵ one is placed in the case of this study in the uncomfortable position of in some instances ascribing to gay men a response that technically can be regarded as pathological. As Douglas Crimp writes, “no gay man or lesbian can have an untroubled response to Freud.”¹¹⁶ Michael Moon even questions the “return to normalcy”¹¹⁷ that is supposed to be the successful

¹¹³Woodward, p. 95.

¹¹⁴Haver, p. 59.

¹¹⁵Schiesari, p. 33.

¹¹⁶Crimp, p. 7.

¹¹⁷Though normalcy here has different referents--the return to normalcy of the work of mourning is to regain a state of psychic equilibrium and not to return to normative heterosexuality--it is the language of pathology and normalcy that has been so fraught and ultimately damaging in discussions of homosexuality and psychoanalysis that I am making an effort to disentangle here. Moon, however, does see correlations between these categories of normalcy; his effort is not one of disentangling but of “restoring the ‘scandal’ of sexuality, specifically of gay male sexuality, to the mourning process.” Moon, p. 235. Additionally, I should like to add here that if, following my earlier argument, “normalcy” for gay men has been in many respects an

outcome of the work of mourning, in that gay men and lesbians “have been categorically excluded from ‘normalcy.’”¹¹⁸ However, Crimp maintains that it is the work not of Freud but of Freudian revisionists that have rendered normalcy available to some and not to others; for Freud’s vision of normalcy is “that there is...no such thing as ever fully achieving it, *for anyone*.”¹¹⁹ Freud himself never pathologized homosexuality, at least not in a way that he did not also pathologize other very routine patterns of development. The appeal in this thesis to Freud in excavating the primary and cumulative cathexes of loss is critical, in that his writing on mourning and melancholia is, if not pivotal to understanding the pathology of grief, still essential in its being a primary and consistent reference point for any writing or understanding of the mechanics of and responses to loss. Freud’s essay has come to occupy “the pivotal position for discussions of melancholia not only in psychoanalysis but also in contemporary literary analysis, feminist theory, and cultural criticism.”¹²⁰ That homosexuality is set and understood perpetually in relation to negative and damaging ascriptions of pathology--homosexuality was released from an equation with pathological mental illness by the American Psychiatric Association only in 1974--is not adequate reason to reject Freud’s pronouncements on the subject of loss, but a signal to salvage them, reconstruct them, and, imperatively, to re-examine the meaning and power wielded by the attribution of “pathological” as a condemnation rather than as a diagnostic account. If indeed melancholia is the mechanism or model that best suits a literature and a cultural identification, then it is more productive to

ongoing experience of mourning, then with Moon I question the possibility of a “return to normalcy,” since I argue that the “normal” experience of “coming out” and achieving a gay identity has so often itself been a mournful process.

¹¹⁸Moon, p. 235.

¹¹⁹Crimp, p. 7. Emphasis his.

¹²⁰Schiesari, p. 33.

strip away the investment in its being pathological than to abandon the term for its damaging connotations.

Gay Men and Mourning in the Time of AIDS

The problem for gay men in the time of AIDS with adhering to what is considered the normal process of mourning is that the normative working through of loss requires that the ego decide not to share in the fate of the lost object and to redirect its attachments to another object: “the sufferer realizes that the object of love no longer exists; the ego then decides not to share in the ‘fate’ of the lost beloved but to break its emotional attachment to it, to ‘cut its losses’ as it were.”¹²¹ This might be one significant point that for gay men in the time of AIDS marks the mourning ego as melancholic, in that there is often no possibility of deciding not to share in the fate of the lost object when one is not only potentially on the same downward mortal course, but the loss that is being worked through is bound to happen again and again--indeed it might be happening in such waves that the “decision” to re-attach is never possible as the new object or objects may be diminishing or dying as well. The loss then is always already happening. To break the emotional attachment to the lost object is, then, to re-ally oneself with the “reality” of the normal world, according to the normative Freudian process of working through mourning. However, for these individuals “reality” is itself ongoing death and loss. Crimp suggests that “this confrontation with reality is especially fraught for gay men mourning now, since our

¹²¹Schiesari, p. 37. One might compare here Laplanche’s reconception of Freud’s description of mourning in Laplanche’s invocation of Penelope’s unweaving her tapestry in order to reweave, rather than Freud’s prescription of cutting and breaking in order to re-affix: “Penelope does not cut the threads, as in the Freudian theory of mourning; she patiently unpicks them, to be able to compose them again in a different way.” Jean Laplanche, “Time and the Other,” *Essays On Otherness*, John Fletcher, ed. (London: Routledge, 1999), p. 252.

decision whether we will share this fate is so unsure.”¹²² There is no return to normality, not only, as Crimp and Michael Moon suggest, because homosexuality itself is not considered “normal,” but because the gay man’s “normality” in the age in which the literary texts I consider in this thesis are set is constant death and loss:

The implications of the experience of multiple and chronic bereavement...are unknown. It is likely that such experiences make it difficult to grieve adequately for a particular loss and thus increase the risk of symptoms of pathological grief reaction.¹²³

The return to reality in this case is always deferred, and the loss becomes impossible to name, because it is not only the loss of a particular individual but of an identity that can’t be fixed while the losses are ongoing. Though the “analogy with mourning [leads] us to conclude that [the melancholic] had suffered a loss in regard to an object; what he tells us points to a loss in regard to his ego.”¹²⁴ As Alan Sinfield writes, gay men “are mourning not just our friends, but the kinds of people that we had hoped to become.”¹²⁵

I am not looking at the construction of readerly identities, in terms of the relationship between self and text, but the construction of identities within the texts. However, in looking at AIDS texts, I will show how these concerns about mourning, melancholia, and identity develop in the literature through aspects of narrative, genre, and literary style as they both reflect and transform communities of readers.

¹²²Crimp, p. 9.

¹²³John L. Martin and Laura Dean, “Bereavement Following Death from AIDS: Unique Problems, Reactions, and Special Needs,” in Margaret S. Stroebe, Wolfgang Stroebe, and Robert Hansson, eds., *Handbook of Bereavement: Theory, Research, and Intervention* (Cambridge: Cambridge University Press, 1993), p. 324.

¹²⁴Freud, “Mourning and Melancholia,” p. 256.

¹²⁵Alan Sinfield, *Gay and After* (London: Serpent’s Tail, 1998), pp. 81-82.

Structure of the Thesis

In analyzing these texts I am investigating the writing of a history of identity and subjectivity and how that has shifted in the course of the AIDS epidemic. In Chapter 2 I set a pattern in the questions I ask in subsequent chapters in regard to the literature, particularly: What does the literature reveal about identity? how does the narrative style construct this? what is the relationship to mourning and melancholia? In Chapter 2 I consider the importance of narrative in AIDS fiction as a means of giving order or meaning to an illness and a virus that is perceived and experienced as chaotic and meaningless. The novels I consider here constitute a sort of “marginal canon” of gay AIDS fiction. They are the most recent works in the spectrum of gay literature that preceded AIDS, and by some of the same authors, namely, Paul Monette, Christopher Coe, and Peter Cameron. Monette had published the novels *Taking Care of Mrs Carroll*¹²⁶ and *The Long Shot*,¹²⁷ both works of gay fiction. Coe published one slim, enchanting novel called *I Look Divine*.¹²⁸ Peter Cameron, known for his gay fiction, was singled out for not including AIDS in his work during the early years of the epidemic.¹²⁹ Allen Barnett and Michael Cunningham, two authors I consider in this chapter, published no books prior to the works I consider here.

The texts I have chosen are, I suggest, works of mourning that construct and reinforce a gay identity. What gay AIDS fiction shares with previous gay literature, specifically the coming out stories, is a reliance on the literary mode of realism, which is devoted to disclosure and detail, filling in gaps of what is unknown or

¹²⁶Paul Monette, *Taking Care of Mrs Carroll* (New York: Little, Brown & Company, 1978).

¹²⁷Paul Monette, *The Long Shot* (New York: Avon Books, 1981).

¹²⁸Christopher Coe, *I Look Divine* (New York: Ticknor and Fields, 1987).

¹²⁹See Myles Weber, “When a Risk Group is Not a Risk Group: The Absence of AIDS Panic in Peter Cameron’s Fiction,” in Nelson.

misunderstood. In this vein, the novels order narrative events so that there is some reflection of disrupted order, but always ultimately a reassertion of narrative order. The narrative never allows any temporal confusion.

Given that gay men have been left out of forms of universality--the universal themes of literature that involve marriage and adultery, for example (as Edmund White observes, "[i]f marriage does not exist as an option between two men, then adultery is equally unavailable"¹³⁰)--the gay AIDS texts I examine here seem to understand and to assert that now with the illnesses and deaths of AIDS, inclusion in a universal narrative is suddenly possible where it never was before. Having been excluded from the normative fictional (realist) narratives of love, marriage, procreation, and death, finally gay men are included in the universal theme of degeneration and death. This is a genre of stories of how AIDS makes gay men for the first time like everyone else.

I further argue in Chapter 2 that an engagement with personal possessions in the texts relies on certain codes that make the objects and the story recognizable to a particular reading community. These shared codes reinforce the terms of gay subjectivity among a gay reading audience. I find in these texts a common disposition to make lists of possessions, especially discarding them or giving them away before death, or sometimes after, by friends and lovers. Some of these objects are vestiges of a liberatory sexual engagement that was part of the time before the onset of AIDS, but they also have a function in relation to mourning. It is the fact that these objects are recognizable to the assumed and projected reading audience, and the fact that they are now being given away, that allow the audience to feel a sense of understanding and community, given the codes associated with the objects and given also the communal

¹³⁰Edmund White, "The Joy of Gay Lit," *Out*, No. 47, September 1997, p. 196.

catharsis and grief of having now to collate them and discard them through the efforts of the dying characters.

Because the mechanisms of mourning and narrative are invested in the return to normative order, in other words, in making order out of what is experienced as chaotic and disrupted, I suggest that mourning and narrative are similar projects. Control over objects suggests a control over life and death and illness. It also suggests a control over past sexuality, and specifically the past sexuality that comes directly before and is thought to instigate the AIDS epidemic. An extension of these “objects” are the baths, one of the kinds of places where men met to engage in sex. In the way that the baths are rhapsodized, named and located and visited and reflected upon, particularly in Christopher Coe’s novel *Such Times*, the baths become a kind of *lieu de mémoire*, or, a site of memory. Given the actual virus, HIV, and the way that it becomes part of the self, the concern with objects is the beginning, I argue, of a determining of inside and outside, in other words, a determining of what is self and nonself, as a way to define the boundaries of the body. This is also suggested in a common representation in these works of the individual ill with AIDS swimming in very cold water. It is an effort to identify and expel the abject, and to know the body again as whole and pure and well, that is, not ill. In a section on swimming and the abject I try to determine how the myriad representations of swimming in these texts are an extension of this process of determining inside and outside, that is, subjectivity, the self without the virus. This is called into question particularly by HIV being a retrovirus; that is, a virus that becomes part of the body that it invades (infects). These books try to articulate a sense of self as a gay man and as a healthy entity, something integral and identifiable and known.

Having identified the gay AIDS fiction as a literature of mourning, I move on in Chapter 3 to discuss the queer AIDS literature as a literature of melancholia. It might seem that I am suggesting that historically the move from mourning to melancholia is a move from gay to queer. In the literature, in AIDS literature, this does seem to be so; the move from a singular subjectivity to one of hybridity is concomitant with the move from gay to queer.

I argue in Chapter 3 that what I term queer AIDS literature is representative of an emergent queer identity that coincides roughly with the span of years in which these texts were produced. In contrast to the realist and conventional nature of the gay AIDS fiction, the queer AIDS literature is so termed because of the postmodern hybridity of the texts and their close involvement in the discourse of sexual identity. Additionally, the narrative style of these texts exposes anxieties over mortality and writing, particularly in the ways the texts embody a melancholic response to illness and loss. Thus, in Chapters 3 and 4 I distinguish the queer AIDS narratives from the gay AIDS fiction in a number of ways and for a number of reasons. One important distinction is that not all of the queer AIDS texts purport to be fiction, and even those that claim to be novels are so suggestive of autobiography that they strain the categories of fiction and autobiography themselves. An important distinction that can be pointed to in the queer AIDS texts, therefore, is the departure these narratives make from the realist form of the gay AIDS fiction and coming out narratives. It is so significant a departure that I devote Chapter 3 to an investigation of the ways the queer AIDS text is a hybrid of different genres. The texts are hybrid in the sense that they draw on more than one genre to create a work of literature that is representative of an experience with AIDS and loss, sometimes prospective loss rather than

retrospective loss. Though I find that the texts are postmodernist in literary orientation, because the narratives deal so closely with issues of identity and especially identity around sexuality, it seems appropriate to distinguish them from the gay AIDS fiction by designating them queer. Another way I qualify them is by distinguishing between an investment in mourning, which characterized the gay AIDS fiction, and melancholia, a strong characteristic of the queer AIDS narratives.

In Chapters 3 and 4 I look at the same texts, only a few of which make claims to be fiction. Those that do make claims to being fiction also make obvious efforts to compromise their status as fiction. Two of the texts are academic essays, and another is a series of vignettes by Edmund White, an author best known for his autobiographical fiction, here in an unusual collaboration with his now deceased lover, whose drawings accompany White's text. I first make connections between illness and queer identity, especially as the designation queer has emerged in the time of, and partly in response to, the incorporation of AIDS into a daily lifestyle. This, and the fact that activism around breast cancer emerged directly out of AIDS activism, allows me to argue that illnesses, particularly AIDS and breast cancer, in some important ways make the designation queer available to the ill individual. This connection is found particularly here in the essays of Eve Sedgwick and Michael Lynch. In a discussion of textual hybridity and viral infection I argue that in some ways the hybridity of the texts are both a response to and also a reenactment of the narratives of viral infection, especially the narrative of how HIV infects and becomes the individual. The logic here of the narratives, while also trying to order events in a way that controverts the chaos wrought by the virus, is actually in some ways a recapitulation of the disorder of illness. It does not fit the pattern of realist narrative,

and, though coherent, does not follow patterns of chronological order. Some of these books thus bear (require) rereading, because it is not always clear what happens when on first encountering the characters and the events.

Some of the texts considered here are not even narrative. For example, the two academic essays do not intend to tell a story. Edmund White and Hubert Sorin's book *Sketches from Memory* is a series of vignettes, and while it attempts to create a sense of the time White and Sorin lived together in Paris, before Sorin died, it is not a conventional narrative with a beginning, middle, and end. Carole Maso's novel *The Art Lover* and Hervé Guibert's novel *To the Friend Who Did Not Save My Life* are the most nearly conventional in telling a story, but the disruptions even here are so severe that they cannot be called narratives in the conventional realist sense.

Just as the episodic nature of illness from AIDS is neither predictable nor chronological, so too are Guibert's and Maso's novels, for example, out of order and unexpected. This follows not only the trajectory of AIDS illness, but also of melancholia, which itself, unlike the more conventional and predictable process of mourning, has an unreliable trajectory and outcome. Thus, in Chapter 4 I show, using psychoanalytic models, how the queer texts introduced and discussed in Chapter 3 are queer in part as a reaction to the melancholia wrought by AIDS. I explore here the melancholic gestures that these texts make in the form of ontological hybridity (as opposed to simply the generic hybridity discussed in Chapter 3), in their engagement with fetishism, and in the attempt the writing seems to make to forestall or ward off loss through the effort of writing itself. Having designated this literature as queer, partly because of how it transgresses boundaries of literary genre and form in a way that prefigures and reflects a transgression as well of sexual identities, I show how the

literature also transgresses ontological boundaries, particularly the boundaries of life and death and illness and health. I then move to a discussion of melancholia, and how these texts are more melancholic than mournful. I elaborate the processes of introjection and incorporation as defined by the psychoanalysts Maria Torok and Nicolas Abraham as a way to look further at the kind of melancholia that is being expressed in these AIDS texts. I then look at how, in the case of Eve Sedgwick's essay "White Glasses" particularly, fetishizing is a melancholic gesture in that it is a refusal to acknowledge and process a loss.

Many of the texts examined in this chapter constitute dialogues of sorts. I argue that this dialogic dynamic is also an aspect of melancholia, because it is a reflection of the internalized ambivalence that is symptomatic of melancholia. It is a mechanism for internalizing the other that has been lost or whose imminent loss one anticipates. Sedgwick's dialogue is with Michael Lynch, her friend for whom she writes an obituary--the essay "White Glasses"--but to whom she can address the obituary because he lives past the point when he was expected to die. Similarly, an essay that I consider by Lynch himself is written as an unusual address to Sedgwick in that he presents his essay as though it were written by her, referring to himself critically in the third person throughout. In Maso's novel, on the other hand, the dialogues are numerous. Much of the book is written in the second person, addressing the narrator's dead father and then her dying friend Stephen. Guibert's book is expressed as a possible dialogue in its title: *To the Friend Who Did Not Save My Life*. I argue most extensively that White's text and Sorin's drawings are not only a collaboration but a dialogue between them, finding a way to internalize Sorin as he is dying and barely able to finish the book before he does die. Finally I address the

question of how the melancholic AIDS text functions for the narrator as a kind of talisman, an icon of writing that will hold mortality at bay: if not the mortality of the other then the mortality of the self who is narrating or writing. In this section I use as my paradigmatic example Carole Maso's novel *The Art Lover*.

In a concluding chapter I move on to examine fiction that is narrated not by those who are implicated in the identities and communities that have come to be associated with AIDS, but by those who are considered to be, and consider themselves to be with regard to AIDS, outsiders. The texts are concerned with relationships that are experienced as those between self and other. Significantly, the narrators do not experience themselves as implicated in the illness, or in any way at risk of contracting AIDS. The heterosexual male narrators, for example, do not experience themselves to be at risk of contracting HIV because they generally do not see themselves as implicated in homosexuality, thus conforming to a common perception that not being gay is sufficient protection against contracting HIV or AIDS.

Along with fiction written from the perspective of heterosexual men caring for dying gay male friends, and family narratives, in which a family, particularly the matriarch, has to care for a member of the family who becomes ill, I also look at the NAMES Project AIDS Memorial Quilt as the best known and quintessential and original AIDS text of witness, especially in the United States. The Quilt reflects the development of the concern with AIDS from being primarily that of gay men, drug users, and their companions to a concern that belongs also to a more mainstream audience. This is what I trace in the fiction and what I find also reflected in the changing perceptions of and attitudes toward the Quilt.

In this regard I trace the development of the reading audience for fiction and other narratives about AIDS from being a primarily gay one to an audience that is understood to be more mainstream. I do this partly by examining short stories from one anthology: *The Way We Write Now*, one of the first anthologies of AIDS literature. I consider how AIDS literature that is intended for a mainstream reading public is often cast as pedagogical. The assumption here is that it has something to teach its readers, rather than containing something with which they can identify, which is how gay AIDS texts are more likely to be classified. In a long section on heterosexual male narrators, concentrating on the writers Louis Begley and Dennis McFarland, I identify in the texts relationships based on watching, rather than on intervention or participation or identification. The relationships are so extremely based on watching without intervention that I determine the relationship of watching as one of voyeurism. By immobilizing the other with his description and his gaze, the heterosexual male narrator is here shown attempting to protect himself from homosexuality and from AIDS. It is here, also, where the heterosexual male narrator distinguishes himself from his dying friend not by not having that illness, but by being not even susceptible to the illness because he is not gay.

Having briefly--transitionally--looked at some AIDS fiction by lesbian narrators, particularly that of Rebecca Brown--in which a friend or acquaintance of the lesbian narrator is dying of AIDS, I finally address family AIDS fiction, in which a member of a suburban domestic (American) family contracts HIV and becomes ill. In Alice Elliott Dark's short story, "In the Gloaming," the ill family member is a gay man, but in another--Alice Hoffman's novel *At Risk*--the ill family member is a 12-year-old girl. Though the relationship here can also be said to be also one of

watching, the relationship between the mother and the ill family member is more one of inclusive watching, in the terminology of Jessica Benjamin, of intersubjectivity.

Let us now turn to Chapter 2, in which, in an investigation of mourning, identity, and gay AIDS fiction, I begin to address the AIDS literature that in many ways has been the most recognizable: AIDS fiction written by gay men featuring a gay male milieu. In this chapter I will demonstrate how AIDS fiction emerged out of an already existing world of gay male writing and gay male identification but also how identification changed in response to the literature's evocation of the mourning going on so severely, especially in concentrated corners of that community.

Chapter 2

Mourning, Identity, and Gay AIDS Fiction

Why AIDS fiction? Why was fiction a prevalent response to the epidemic?¹ As a reaction to the AIDS epidemic, in which hundreds and then thousands of gay men were becoming ill and dying of a syndrome with no known provenance or way to stop its spread, narrative can bring one manner of comfort and logical resolution.

Narrative is, after all, a way to make order out of confusion, to make sense out of seemingly disparate and random events, and an attempt to impose meaning and order on what can be experienced as extremely chaotic. "Narrative," Jackie Stacey remarks in her cultural study of cancer, "offers a way of ordering events and assigning roles; it gives temporal continuity and spatial coherence."² As I shall argue in this chapter, illness from a virus that has rendered the self in some ways unknowable renders control a critical concern for the narrators and for a reading audience that seeks to be reassured that some control is still possible.

While literature has always played an important role in the formation of gay identity, so too does AIDS literature participate in the reaffirmation of gay identity, but more conspicuously integrates the relationship between gay identity and mourning at the onset of AIDS. In this chapter I will examine how gay AIDS fiction reveals the evolution of a certain gay identity and the relationship this fiction has to the working through of mourning that is provoked by the losses brought about by AIDS. In looking at fiction published between 1990 and 1995, I am focusing on the years in

¹ Published in 1984, Paul Reed's novel *Facing It* is "[g]enerally credited as the 'first AIDS novel.'" Paul Reed, "Early AIDS Fiction," in Judith Laurence Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* (Chicago: University of Illinois Press, 1993), p. 92.

² Jackie Stacey, *Teratologies: A Cultural Study of Cancer* (London and New York: Routledge, 1997), p. 8.

which the fiction of AIDS has moved into a stage of a more imaginative literary style. In 1993, Michiko Kakutani, book critic for *The New York Times*, commented that AIDS fiction has followed a trajectory of “memoirs and journals...followed by a growing number of documentarylike novels and short stories, and in recent years by increasingly metaphorical and idiosyncratic works of fiction.”³ To understand the time span of the early 1990s with regard to the changes in literature concerning the AIDS epidemic, it is useful to look at the “companion anthology” *Things Shaped in Passing: More “Poets for Life” Writing from the AIDS Pandemic*, a book that emerged in 1997, eight years after the original *Poets for Life: Seventy-Six Poets Respond to AIDS*, published in 1989.⁴ Michael Klein, editor of both anthologies, comments that “[m]any of those early poems were grounded in a kind of shock that anything could be expressed at all.”⁵ “Poetry about AIDS,” he writes,

has changed considerably since 1989. While the disease is becoming a chronic, rather than terminal, illness, it has still devastated the world and...a cure is nowhere in sight. I suppose the poems being written today are in some ways more insistent in recognizing AIDS as some enormous aspect of the everyday.⁶

The novels of this period also increasingly recognize AIDS as part of the landscape of the everyday. The second anthology, Klein concludes, “is marked by the big gesture of the elegist leaving the bedside and looking at the whole fractured world--what the world has become with AIDS in it.”⁷

³ Michiko Kakutani, “For Gay Writers, Sad Stories,” *The New York Times*, March 12, 1993, p. C1.

⁴ Michael Klein, ed., *Poets for Life: Seventy-Six Poets Respond to AIDS* (New York: Crown Publishers, 1989).

⁵ Michael Klein, “Here, but Differently,” in Michael Klein and Richard McCann, eds., *Things Shaped in Passing: More “Poets for Life” Writing from the AIDS Pandemic* (New York: Persea Books, 1997), p. xvii.

⁶ Klein, “Here, but Differently,” p. xvii.

⁷ Klein, “Here, but Differently,” p. xviii.

The fiction considered in this chapter--by the writers Paul Monette, Allen Barnett, Christopher Coe, Michael Cunningham, and Peter Cameron--also addresses what has become the everyday: gay life as circumscribed by the exigencies of loss, mourning, and illness. These texts are works of mourning that construct and reinforce a gay identity.

Narrative and Mourning

The gay AIDS fictions offer a structure for the work of mourning. The narrative form to which the narratives of the gay AIDS fiction subscribe is a realist structure that creates coherence and order out of disparate events. It is the realist narrative structure that best contributes to the possibility of and constructs a format for the work of mourning. The work of mourning is carried out on the scaffolding of narrative structure. Mourning is worked through by the travail of piecing together a story in a recognizable and structured manner. Building a narrative makes the experience recognizable, able to be shared therefore, and comfortingly ordered. It is in this way that identification is possible, by rendering the experience into a story that has some universality, a recognizable narrative.

Mourning and narrative are similar projects. Both are trying to return disruption to order. Both, also, rely on completion as a mark of successfully restored order: like narrative, "the most important aspect of [the] work of mourning is that it must come to an end."⁸ Particularly in the case of illness narratives, the work of narrative often is itself the work of mourning. If "[s]tories about illness are an intensification of the way in which we generally understand our lives through

⁸ Kathleen Woodward, "Freud and Barthes: Theorizing Mourning, Sustaining Grief," *Discourse*, Vol. 13, no. 1, Fall-Winter 1990-1991, p. 95.

narrative,”⁹ then the narratives of homosexuality have been largely stories of contrition and loss. Before the Stonewall riots that marked the beginning of gay liberation, for the most part the only gay literature aside from pornography was “the apology (aimed mainly at straight readers), a genre designed to prove that gay men are doomed, sensitive creatures who usually have the good grace to commit suicide”:¹⁰

After Stonewall a new phenomenon emerged--gay fiction, written by, for, and about openly gay men. The new fiction was not the familiar plea for compassion aimed at straight readers by an author whose own sexuality was usually kept ambiguous and whose characters comprised only two or three sad pansies in a field of otherwise dull-normal daisies.¹¹

Of the two genres that comprise gay fiction, one “is the coming-out novel and, since 1985, the [other is the] AIDS novel,”¹² both of them mournful narrative genres that attempt to render normative and whole what is lived as fractured and unsettled.

The works considered here are representative of a large and growing canon of gay male AIDS fiction, which is fiction written by and about gay men that significantly addresses AIDS within its narrative. The canon is a non-mainstream canon, and in this sense is, paradoxically, a marginal canon. However, there is a core collection of fiction that anyone familiar with gay or AIDS fiction will know and is likely to have read.

The texts I will be looking at in this chapter are Paul Monette’s novel, *Halfway Home*,¹³ Michael Cunningham’s novel, *A Home at the End of the World*,¹⁴ Allen

⁹ Stacey, p. 8.

¹⁰ White, “Gay Lit,” p. 110.

¹¹ White, “Gay Lit,” p. 112.

¹² White, “Gay Lit,” p. 112.

¹³ Paul Monette, *Halfway Home* (New York: Avon, 1991); subsequent references will be made parenthetically within the text.

¹⁴ Michael Cunningham, *A Home at the End of the World* (New York: Bantam Books, 1992; originally published by Farrar, Straus and Giroux in 1990); subsequent references will be made parenthetically within the text.

Barnett's short story, "Philostorgy, Now Obscure,"¹⁵ Christopher Coe's novel, *Such Times*,¹⁶ and Peter Cameron's novel, *The Weekend*.¹⁷ Published between 1990 and 1995, these are exemplary works of AIDS fiction, representative of other AIDS fiction published in that time. For example, Edmund White deems that the "AIDS novel [is] best exemplified by Paul Monette's *Halfway Home*,"¹⁸ and it has been said that Paul Monette is "the bard of AIDS,"¹⁹ the "paradigmatic writer" in the "barren land of displacement, pain, and loss" wrought by AIDS.²⁰

Often in these works AIDS is the primary focus of the narrative--a lover is ill or has died, the protagonist is diagnosed as HIV infected--while in some of these works--most significantly among the works I examine here, Cunningham's *A Home at the End of the World*--AIDS forms a frame of the narrative. That is, the story may not be significantly *about* AIDS, but is weighted nevertheless by the presence of and awareness of AIDS as being in some way important to the narrative trajectory and resolution.

Realism

The fictions that I am considering here are invested in the convention of realism, which has a function in creating the illusion of wholeness. Realist fiction "connotes a

¹⁵Allen Barnett, "Philostorgy, Now Obscure," *The Body and Its Dangers* (New York: St. Martin's Press, 1990); subsequent references will be made parenthetically within the text.

¹⁶Christopher Coe, *Such Times* (London: Hamish Hamilton, 1993); subsequent references will be made parenthetically within the text.

¹⁷Peter Cameron, *The Weekend* (New York: Plume/Penguin, 1995, originally published by Farrar, Straus and Giroux in 1994); subsequent references will be made parenthetically within the text.

¹⁸Edmund White, "The Joy of Gay Lit," *Out*, No. 47, September 1997, p. 112.

¹⁹John M. Clum, "'The Time Before the War': AIDS, Memory, and Desire," *American Literature*, Vol. 62, no. 4, December 1990, p. 650.

²⁰Clum, p. 648.

way of depicting, describing a situation in a faithful, accurate, 'life-like' manner."²¹

It is the narrative form of "presenting objectively and concretely the observable details of actual life"²² and is concerned with "criteria such as truth of observation and a depiction of commonplace events, characters, and settings."²³

In a struggle with the disorientation evoked by an uncertain serostatus and health prognosis, the realist text will engage in the effort "of capturing, wrestling, and controlling a process of change which seems to defy representation."²⁴ Thus realism can be understood as a strategy to "assuage fears of powerlessness."²⁵ As a literary mode of representation realism

has a specific reference to a particular literary movement which started in France in the early nineteenth century, and flourished in the latter part of the century. The names of the novelists most associated with this movement are those of Balzac, Stendhal, and Flaubert. These writers made enormous efforts to ensure that 'factual details' in their works were 'correct'--that is to say, capable of being checked against an external reality by empirical investigations.²⁶

However, though realism is a literary form still in popular use, and has indeed in many respects come to be associated with the general conception of novelistic style,²⁷ the implications of realism have shifted: "a progressive force exposing the conditions of industrial society, realism has turned into a conservative force whose very act of

²¹J. P. Stern, *On Realism* (London and Boston: Routledge and Kegan Paul, 1973), p. 40.

²²Alice R. Kaminsky, "On Literary Realism," in John Halperin, ed., *The Theory of the Novel* (New York: Oxford University Press, 1974), p. 217.

²³René Wellek, *Concepts of Criticism*, Stephen G. Nichols, ed. (London: Yale University Press, 1963), p. 229.

²⁴Amy Kaplan, *The Social Construction of American Realism* (Chicago and London: University of Chicago Press, 1988), p. 10.

²⁵Kaplan, p. 10.

²⁶Jeremy Hawthorn, *Studying the Novel*, 3rd ed. (London: Arnold, 1985; originally published 1977), p. 78.

²⁷Realism "has dominated the novel form to the extent almost of defining it." Cecil Jenkins, "Realism and the Novel Form," in D.A. Williams, ed., *The Monster in the Mirror: Studies in Nineteenth-Century Realism* (Oxford: Oxford University Press, 1978), p. 6.

exposure reveals its complicity with structures of power.”²⁸ It has been argued that realist fiction functions as a conservative mechanism, that realism is “a fictional conceit, or deceit, packaging and naturalizing an official version of the ordinary.”²⁹ Critics, “such as Catherine Belsey, Terry Eagleton, and Edward Said[,] see Realism as a tool of ideological control, precisely *because* it pretends to be normal and neutral.”³⁰ “Novels that are most like our everyday reality,” observes one critic, “are not always the ones that lead us to think most critically about that reality.”³¹ However, its conservative function, its effort to maintain the status quo, is precisely what renders realism a desirable narrative form for the writers of gay AIDS fiction. Although “the Realist novelist wishes to render the real, and to do so objectively, [realism] can in practice achieve only an illusion of reality and an appearance of objectivity.”³² The reassuring illusion of objectivity is what fulfills the function of narrative order for the authors of gay AIDS fiction. Realism therefore functions as “part of a broader cultural effort to fix and control a coherent representation of a social reality that seems increasingly inaccessible, fragmented, and beyond control.”³³

The realism of the gay AIDS fiction is a way of creating a whole, unfragmented, objective self and therefore disassociating the self from other selves; “realists draw boundaries and explore their limits.”³⁴ The subjective wholeness is achieved partly through the representation and reinforcement of a character’s whole unfragmented body, as I will show through the fiction’s determination to outline and

²⁸Kaplan, p. 1.

²⁹Kaplan, p. 1.

³⁰Alison Lee, *Realism and Power: Postmodern British Fiction* (London and New York: Routledge, 1990), p. 27; emphasis in the original.

³¹Hawthorn, p. 77.

³²Jenkins, p. 11.

³³Kaplan, p. 8.

³⁴Kaplan, p. 11.

keep whole the ill body. I will be arguing that relying on realism as the fundamental literary form is one way in which the narrative structure enacts the work of mourning, for mourning requires a severing of self from the lost other.

The achievements of many works³⁵ of gay AIDS fiction are in some important ways paradoxical. While they communicate the traumatic and jarring circumstances that AIDS creates and perpetuates, the works that are most invested in emotional realism are also the most structurally conventional, that is, they embody the kind of narrative that is most comfortable, accessible, and familiar. The works contemplated here--and these are representative of many other works of the genre--rely on either a first-person narration or a third-person narration of limited point of view, and in so doing assume that there is a self, an "I"--a whole unfragmented "I"--who can speak. "My brother used to tell me I was the devil," begins Paul Monette's narrator Tom Shaheen in the first-person-narrated novel *Halfway Home* (p. 1). Christopher Coe's narrator, Timothy, opens the novel *Such Times* with thoughts of his deceased lover, reflecting, "Most days I think of him as though he is alive" (p. 3). "Once our father bought a convertible" (p. 3), begins Bobby in Michael Cunningham's *A Home at the End of the World*, though he will not be the only first-person narrator in this story; narration will be taken up by each principal character in the novel. The remaining narratives I will consider here--Peter Cameron's novel *The Weekend* and Allen Barnett's short story "Philostorgy, Now Obscure"--are imparted in the third person, Barnett's principally from the point of view of the protagonist, Preston, and only

³⁵Following Peter Sacks' employment of the term "work" in regard to the elegy, I propose that the gay AIDS narrative also "is to be regarded...as a *work*, both in the commonly accepted meaning of a product and in the more dynamic sense of the working through of an impulse or experience--the sense that underlies Freud's phrase 'the work of mourning.'" Peter M. Sacks, *The English Elegy: Studies in the Genre from Spenser to Yeats* (Baltimore and London: The Johns Hopkins University Press, 1985), p. 1; emphasis in the original.

Cameron's from an omniscient narrative point of view. This is in keeping with gay AIDS fiction's adherence to realist form in that "most Realists cling to a belief in a core identity."³⁶ The narrators in the story are identifiable, reliable, and unfailingly fictional; that is, the fictional world is held together by the narration, neither challenged nor broken by extratextual intrusions.³⁷

My method will be now to turn to the texts and identify particular textual strategies of these fictional narratives that render them realist. I will show that there are three strategies that gay AIDS fiction employs in adhering to realist narrative: an investment in disclosure and candor, an adherence to chronological narrative time, and an intervention into a previously elusive universal narrative. I will then show how these strategies are related to the processes of mourning.

Disclosure

The AIDS narratives I am considering here in many ways constitute a continuation of the coming out stories that for at least a generation have characterized gay stories. They are frank, candid, and strongly invested in the notion that if everything is divulged, there will emerge some normative structure that parallels a dominant, or universal, narrative. In style, they rely not only on realism but on an aesthetics of disclosure, in a manner that sometimes hints at concealment, at mystery, but ultimately commits itself to candor.

As in the earlier coming out literature, the issue of lack--any deficiency that might compromise the illusion of wholeness--in the later gay AIDS fiction is not

³⁶D.A. Williams, "The Practice of Realism," in Williams, *The Monster in the Mirror*, p. 274.

³⁷Not all AIDS literature relies so easily on this assumption of an unfragmented self, as I will explore later in considering hybrid, or queer, AIDS literature.

addressed. By producing an integral narrative the issue of lack, any crack in the idea that a core gay identity is possible, is avoided, reacted to, and remedied. Candor is the illusion that is striven for, a belief that everything can be said and named and recognized. There is a compulsion to name everything, to have a language for everything. This strategy might be thought of as a cataloguing of what will be lost, and also an attempt to recapture a time before the catastrophe. One novel acknowledges this candor within the text:

The early seventies have been called a candid age. Someone went so far once as to name them, in print, as the Age of Candor. Candor *was* afoot, and it became the fashion, more than it is now, I think, to reveal what could be known about one's character, openly, in detail, preferably all at once. Nothing was private, little was filtered. You were constantly bumping into people being open, disclosing every family nightmare, every marital contempt, every mother fixation, daddy fixation, all hatreds, all loves, everything oozed forth (Coe, p. 64).

Yet it is not exclusively the "early seventies" that was a candid time, but also, as Coe's fiction characterizes it, the present (the early 1990s). In the novel *Such Times* Timothy details his eighteen-year relationship with Jasper, who has died of AIDS. Timothy is himself infected, and his best friend Dominic is ill. Wanting to divulge everything, obscure nothing, Timothy strips to its essentials each element of an elegant meal ("*oursins*" cooked "mysteriously in some odd and wonderful crepe batter," "Sautéed spinach leaves," "slivered almonds, softened by a slow steep in butter," "thinly" sliced "fennel," and "grilled chateaubriand...cooked precisely *à point*," p. 256), the kind of paper and pen and ink on which the menu is written ("writing our menu in French, putting it down in dark red ink, in fountain pen, on fine gray paper that I had bought for him in Paris, at Papier Plus," p. 33), the vineyard and house of the wine ("a Brunello de Montalcino, a Corton Charlemagne, or a Batard

Montrachet,” “a perfectly chilled Gavi dei Gavi La Scolca,” pp. 87-88), the brand of cigar (Montecruz 210s, pp. 102, 125), the precise names of flowers (“speciosum lilies,” p. 49), even the virus (“a coil of nucleotides” made up of “cytosine, adenine, guanine, and thymidine,” pp. 208-209). Everything is articulated, nothing held back. There are no detectable elisions of story or identity. With such imminent losses there is a tendency to believe, the novel suggests, that if everything is articulated the losses might be stemmed, or sufficiently memorialized. As, indeed, we have now through these novels an incorruptible image of that time: it is “hard to believe,” reflects Timothy in Christopher Coe’s novel about the sexual “cavorting” of the years before AIDS, “that there used to be such times.” Part of the effect of the narrative is to memorialize “that time,” as though if the past can be made solid in detail and known, then the holes left by disintegration in the present can be filled and the present be made known and solid and manageable too.

Attention to detail is characteristic of realist narrative; among writers of realist fiction there is detectably “a shared commitment to the portentous detail.”³⁸ If one can gain control over the past, the present will, if not be also controllable, at least make sense. The details gathered and sorted will reveal meaning in the present; that is, the “most casual word, the most trifling gesture, the most tangential episode all submit easily to the discipline of being *revealing* words, gestures and episodes.”³⁹ Disclosure therefore is constituted in these narratives by two aspects: recollecting and articulating everything so there are no gaps left in memory, that hence every moment and detail is accounted for. This fulfills the realist stricture of leaving no holes as

³⁸Leo Bersani, “Realism and the Fear of Desire,” in Lilian R. Furst, ed., *Realism* (London and New York: Longman, 1992), p. 240.

³⁹Bersani, p. 240; emphasis in the original.

“realistic fictions are erected on firm ground which reveals no epistemological cracks”⁴⁰: no egregious or unexplainable gaps in narrative time or in the narrative’s space.

There is the sense that the gay AIDS story is a recapitulation of everyday life, that everything is on the surface, nothing is hidden, and there are no latent meanings. There is a compulsion to speak and put everything on the page. Christopher Coe, in his profuse and richly detailed lament by the character Timothy for his dead lover Jasper, relishes the details of memories and the small moments of Timothy’s days: “It amazes me,” Timothy ruminates,

that today or tomorrow I can photograph a man or a woman and make them look better than they do; that I can read a book I’ve always wanted to; that I can go to a movie; that I can peel a sweet mango and cut it into pieces to eat while I read in the newspaper that astrophysicists are, at this minute, entertaining notions of establishing, in the next two or three hundred thousand years, photosynthesis on the planet Mars (Coe, pp. 220-221).

By making a narrative and making it whole the work can be said to be remedying loss, or reacting to loss. Making a whole, gapless, narrative is the remedy for sudden unexplainable disintegration.

Part of the effect of disclosure as a formal rendering of realism is to forge an identity through the construction of a sense of community. What the disclosure of details does is to reinforce a sense of community among a gay reading audience, reinforcing the terms of gay subjectivity and of shared grief.

In his post-structuralist analysis of Honoré de Balzac’s novella *Sarrasine*, Roland Barthes “inventories the codes necessary to the production of the classical ‘readerly’ text.”⁴¹ “The five codes create a kind of network, a *topos* through which the

⁴⁰Stern, p. 31.

⁴¹Robert Stam, Robert Burgoyne, and Sandy Flitterman-Lewis, *New Vocabularies in Film Semiotics: Structuralism, Post-Structuralism and Beyond* (London: Routledge,

entire text passes (or rather, in passing, becomes text)."⁴² The codes refer to elements in the text that are "fragments of something that has always been *already* read, seen, done, experienced; the code is the wake of that *already*."⁴³ The code by which gay AIDS fiction can assume and create a sense of readerly community is the semic code. Cultural objects that a gay reading audience will readily identify as gay will encourage a knowing reading and cement a sense of belonging insofar as the "semic code is premised on a high degree of cultural repetition, whereby connotative signification has been habitually associated with given cultural objects."⁴⁴ The realist novel relies on semic encoding, for "the 'realistic' novel is taken to mean a kind of fiction that results when the artist and his audience share the same assumptions."⁴⁵ For example, though in the following passage the narrator of *Such Times* does not signal his observations as composing a gay milieu, the brand names, the singing stars, and the details, for example, of the merchandise he focuses on, signals the scene, for those who are able to read the codes, as a gay one:

I went to a cafe across the street. From where I sat on Seventh Avenue, I watched as hundreds of people passed by. Most of them carried bundles, things they had bought from stores with names like New York Man, N.Y. Jock, All-American Boy....Every third or fourth person I saw was young and muscular and wearing as little as possible. All these men were going on with their lives, dressing for the weekend, buying new bathing suits for the beach, new jockstraps for the bars, listening to and possibly lip-synching Jessye Norman, or Diana Ross, or Barbra Streisand, or, God forbid, Madonna, watching the newest porn video, with or without a buddy (p. 285).

1992), p. 192.

⁴²Roland Barthes, *S/Z*, Richard Miller, trans. (New York: Hill and Wang, 1974), p. 20.

⁴³Barthes, p. 20; emphasis in the original.

⁴⁴Stam et al., p. 195.

⁴⁵John W. Loofbrourow, "Realism in the Anglo-American Novel: The Pastoral Myth," in John Halperin, ed., *The Theory of the Novel* (New York: Oxford University Press, 1974), p. 257.

The attention to detail is an effort to hold nothing back, to represent the place and the time candidly, to reveal, and in doing so create not only a gapless candid narrative that reacts to the disintegration that is associated with AIDS illnesses but also to create another kind of seamless narrative, which is the possibility of a whole and candid sense of individual identity within a community.

Time

Most illnesses are thought to offer a typical diagnosis and prognosis: onset of illness, deterioration, and then recovery, or, alternatively, illness, deterioration, and then death. As AIDS is a syndrome, one often only suspects that one will get ill, and is provided with a spectrum of possible illnesses to expect. Additionally, with testing widely available, often one knows one is “ill” before experiencing the symptoms of illness. But one does not know what will debilitate one, or what one will ultimately die from. The narrative of AIDS itself is unreliable. As Stacey observes, “[c]ancer and AIDS both have highly unpredictable prognostic patterns.”⁴⁶ Stacey also suggests that in turn “AIDS narratives might...be said to have put pressure on the structures of conventional genres of storytelling,”⁴⁷ given the uncertainties and instabilities of AIDS illnesses. Further, she suggests,

there is now a general anxiety about the narrative meaning of time in a culture where knowledge about AIDS has thrown into question conventional temporal securities and predictable trajectories of self-development.⁴⁸

Later, in a discussion of queer AIDS literature, it will be evident that the fragmented nature of its narrative is more indebted to the unreliable trajectory of an HIV-related illness. The conventional reliability of gay AIDS fiction, which is itself based on the

⁴⁶Stacey, p. 10.

⁴⁷Stacey, p. 9.

⁴⁸Stacey, p. 9.

conventions of the coming out story, forms a basis from which the queer AIDS literature will depart. The coming out story, like the later gay AIDS fiction, attempted to place narrative order on an experience that was often experienced as aberrant and disrupted. The

formula normally used in [the coming out novel] involves, first, showing us the family relationships before the coming out, then the more or less traumatic coming out period itself, and finally, some time later, we see whether and to what extent the family/friends have adapted to the new information.⁴⁹

Gay AIDS fiction relies on a not dissimilar model but the story is not the transfigured *bildungsroman* of the coming out tale, but one of illness and what is thought of as illness' typical progression, now transcribed to AIDS, whereby one gets infected, gets ill, maybe gets better and then ill again a few times, and then dies. *Such Times* quickly dispenses with the early life story of the coming out paradigm, insisting that the important years of Timothy's life are constituted by the years he has known his lover Jasper:

By most of my life I mean the years after I met Jasper. I had a mother, of course, a father, grew up in a house, was educated, but all that is behind me now (p. 3).

Coe's narrative still relies, however, on a similar trajectory of development to the coming out story. Rather than the story of his growing up, Coe's novel is the story of Timothy's eighteen-year relationship with Jasper ("my life, all of it worth remembering, began really with Jasper" p. 3), with an account of a beginning (how he and Jasper met), a middle (the story of their relationship: where they traveled, where they dined and what they ate, how often they saw each other), and an end (Jasper's death). But the pathology of illness, and in particular, the spectrum of AIDS illnesses,

⁴⁹Mark Lilly, *Gay Men's Literature in the Twentieth Century* (London: Macmillan, 1993), p. 206.

sometimes tests the conventional narrative progression for which the coming out stories laid the groundwork and from which the gay AIDS fiction is a derivation. It is interesting to note that Christopher Coe's and Peter Cameron's are the only novels in this selection in which narrative time is vaguely disrupted, and also the only novels in which the figure with AIDS is, at the onset of the novel, already dead, and where the characters are chiefly caught up not in illness but in mourning the lost other. The time is out of joint partly due to the inability to reconstruct what is lost. There isn't a severe departure in form, but there is beginning to be a strain.

If one of the reasons the gay AIDS fiction relies on a realist format is that it most closely resembles the linearity that an illness narrative is thought normatively to follow, and if AIDS is an illness that defies a linear narrative, there is all the more reason to try to create a narrative that structures things the way one cannot in life. The narrative structure of these novels rather mimics the normative structure of mortal illness: infection (for example), illness, death (or, beginning, middle, end). In attempting to impose order on the disruptive realities of illness, the "usual temporal sequencing is both disrupted and reimposed in the search for order, reason and predictability."⁵⁰ In response to this, "narratives move from problem to resolution with some sense of predictability and comforting repetition."⁵¹ What narrative does in responding to the disruptive experience of AIDS illness is compounded and reinforced by the formal mechanisms of realism.

The narrative structure of gay AIDS fiction is not only like the coming out genre in form, relying also on the devices of candor and disclosure, but, indeed, gay AIDS fiction is a derivation--a product--of the coming out story. It assumes an

⁵⁰Stacey, p. 5.

⁵¹Stacey, p. 8.

undifferentiated subject who is realized--both constructed and stabilized--by the trajectory of the story. The story is dependable; we can trust the narration, it takes place along a teleological time line, even if the story relies on flashback, or analepsis, to unfold the continuous timeline; it is unfractured and there is no confusion as to who is speaking and what is happening.

Two examples of gay AIDS novels that follow a regular chronological order are *A Home at the End of the World* and *Halfway Home*. Cunningham's novel is a plaintive tale that focuses on Bobby and Jonathan growing up in Ohio and their boyhood friendship, and then their later friendship with Clare in New York City. Clare gives birth to a daughter fathered by Bobby, whom for a time they all raise together in upstate New York, until Clare leaves to raise her on her own. Erich, Jonathan's erstwhile lover, is living with Jonathan and Bobby by the end of the novel and dying of AIDS. Yet Jonathan worries about his own health: "Something was wrong with me," Jonathan broods, "I lacked some central ability to connect, and I worried that it might be an early indicator of disease" (p. 228). It is Erich's illness that provides a focus and concrete manifestation of the sorrow and anxiety that underpins the story. At the end of the novel Erich is not yet dead, but he is dying, and Jonathan considers, "I myself might very well be dying" (p. 421).

A Home at the End of the World follows a standard chronology, not unlike the progression of the *bildungsroman*. The main difference is that this novel is told not by one narrator whose life story the novel follows, but changes narrative perspectives from chapter to chapter depending on which character is the novel's focus; the other characters are then seen and described through the narrating character's perspective. Even though the narrators switch back and forth, the story is told in a chronological

narrative order. In Part 1 Bobby and Jonathan are boys; in Part 2 Jonathan has moved to New York and lives with Clare, while Bobby is still back in Cleveland living with Jonathan's parents before he moves to New York to live with Jonathan and Clare; and in Part 3 Bobby, Jonathan, and the pregnant Clare move out of New York City to a house in upstate New York. Parts 1, 2, and 3 follow the pattern of beginning, middle, and end; there are no surprises or disruptions in the narrative order of the novel.

Halfway Home is a novel about Tom Shaheen, who is living with AIDS in an old beach house in Malibu, California, owned by Gray Baldwin and his grandmother, Foo. Gray and Tom fall in love. Tom is visited briefly at the beginning of the novel by his brother Brian, his childhood tormentor, with whom he is then reconciled when Brian returns, after a tragedy, with his wife and son, Daniel. Tom is a retired performance artist, encouraged on two occasions in the course of the narrative to return to the stage in the reprised controversial role of Miss Jesus, in the theater he founded with his close friend Mona. The entire story of ten chapters takes place over one summer. There is nothing abrupt in the narrative, nothing that disturbs the sense of order and chronology. Even illness is incorporated smoothly into the unbroken web of the story.

Sometimes in gay AIDS fiction, however, narrative time is indeed disrupted. Yet the disruption of narrative order actually proves the rule of order that these works ostensibly violate. It is the immediate signposting of order at the point of discrepancy that sustains, and especially makes evident, these novels' adherence to, and reliance on, realist chronological narrative coherency.

A small, intense and lyrical novel, *The Weekend* describes the protagonist Lyle's weekend visit with Robert to Marian and John's home in upstate New York.

Lyle's lover Tony (John's half brother) had died in that house exactly a year earlier. Lyle is an art critic and brings Robert, a young artist, with whom he has recently started an affair. The weekend is tense, sometimes loving, and quietly explosive. The seemingly "unreliable" narrative time of some of the stories--*The Weekend*, for example, begins a year after Tony's death, yet there are long episodes in the novel where he is alive--reflect the unreliable narrative of AIDS itself.

Structuralist postulations on narrative, arising out of Russian Formalist theories, consider narratives to be formulated by two components: "a story...the content or chain of events (actions, happenings), plus what may be called the existents (characters, items of setting); and a discourse...that is, the expression, the means by which the content is communicated."⁵² Contemporary explanations of narrative rely strongly on the Russian Formalist analysis, in which "[s]tory is the content of the narrative expression, while discourse is the form of that expression" and "[w]hat is communicated is *story*, the formal content element of narrative; and it is communicated by *discourse*, the formal expressive element."⁵³

Another element to narrative is the order in which the events are revealed. Gérard Genette draws on a distinction in narrative between *récit*, by which he means the actual order of events in the text; *histoire*, which is the sequence in which these events "actually" occurred, as we can infer this from the text; and *narration*, which concerns the act of narrating itself. These aspects have also been labeled "story,"

⁵²Seymour Chatman, *Story and Discourse: Narrative Structure in Fiction and Film* (Ithaca, NY and London: Cornell University Press, 1978), p. 19. For other descriptions and analyses of Russian Formalism, see Ann Jefferson and David Robey, *Modern Literary Theory: A Comparative Introduction*, 2nd edition (London: Batsford, 1986), pp. 39-42; Terence Hawkes, *Structuralism and Semiotics* (London: Methuen, 1977), pp. 59-73; and Stam et al., pp. 70-72.

⁵³Chatman, p. 23 and p. 31.

“text,” and “narration,” respectively.⁵⁴ The first two categories are equivalent to a classic Russian Formalist distinction between “plot” and “story.”⁵⁵

Such an analytic framework is helpful for an interpretation of the temporal structure of the texts under discussion. The “order of presentation need not be the same as that of the natural logic of the story.”⁵⁶ In *The Weekend* the “story” and the “text” are not entirely correspondent. “[E]vents presented out of sequence are called anachronies,” and include analepses and prolepses.⁵⁷ The novel begins a year after Tony’s death, yet there are anachronic passages in which Tony is alive and among the primary characters. It is clear from these passages that an analepsis is being introduced: Tony’s name is mentioned as a signal that the time narrated is retrospective. An analepsis, “or textual point of retrospection, reaches back to a time anterior to that being narrated.”⁵⁸ Of the book’s twenty-three chapters, five are analepses that feature Tony alive. Following is a numbered outline of the chapters and their events; the analeptic episodes are marked in bold:

1. Marian, at the house on Long Island, walks in the early morning down to the river while her husband John and their son Roland are sleeping.
2. Lyle is in Grand Central Station waiting for Robert. It is Saturday morning, and they are going to Marian and John’s house for the weekend. They take the train together.
3. A reflection on how Lyle and Robert met, earlier that summer, and their subsequent dinner together in July. Robert comes over to Lyle’s apartment to look at the room that Lyle has suggested is available as a possible artist’s studio. They sleep together.
4. John and Marian in Long Island play with Roland. They discuss Lyle’s arrival later that day.

⁵⁴Cited in Shlomith Rimmon-Kenan, *Narrative Fiction: Contemporary Poetics* (London and New York: Routledge, 1983), p. 3.

⁵⁵Terry Eagleton, *Literary Theory: An Introduction* (Minneapolis: University of Minnesota Press, 1983), p. 105.

⁵⁶Chatman, p. 43.

⁵⁷Stam et al., p. 118.

⁵⁸Steven Cohan and Linda M. Shires, *Telling Stories: A Theoretical Analysis of Narrative Fiction* (London and New York: Routledge, 1988), p. 85.

5. Laura Ponti, a new character, is at her rented home in Long Island waiting for her daughter Nina to arrive.
6. **Tony's death, the last day of July, the summer before.**
7. Lyle and Robert arrive at the train station. Within this section there is an explanation of who Tony was and how he is connected to them: he was Lyle's lover and John's half brother.
8. Robert and Marian in conversation; then Lyle and Marian in conversation.
9. Robert, Marian, and Lyle in conversation.
10. **Swimming scene with Tony, Lyle, and Marian.**
11. Robert observes Lyle sleeping; John and Lyle talk; Robert swims.
12. **Tony on a boulder with Marian.**
13. Conversation and sex between Lyle and Robert.
14. Marian leaves Roland with John to go for walk. She remembers Tony.
15. Laura and Nina shop.
16. **Tony shaves and tells Lyle he might return that evening to New York.**
17. Robert showers, then overhears John and Marian discussing him.
18. Laura has a difficult conversation with Nina before leaving for dinner at Marian and John's house.
19. John puts Roland to bed, before Saturday night's dinner.
20. Lyle and Robert walk after dinner and have an argument.
21. While driving home Laura comes across Robert.
22. **Discussion between Tony and Lyle.**
23. Robert returns to New York; later Lyle returns to New York.

Though the order of narrative events in *The Weekend* is discrepant--that is, the story chronology and the textual sequence are discordant--it is important that there is nevertheless no confusion about what happens when. As soon as Tony is mentioned in a sequence, it is clear that an episode is being described that took place before his death a year before the narrative time at the onset of the story. When Robert is mentioned in a new chapter, it is clear that narrative time has been restored to the "present." At the beginning of Chapter 6, the first analepsis, it is announced that we will return to the day of Tony's death: "Tony died on the last day of July" (p. 66). It is only after we have been instructed in this mechanism of flashback, as it were, that the author five chapters later can suggest an analepsis a few lines into the chapter rather than announce it at the outset. Chapter 10 begins:

The day was at its hot, still center, that hour or two on a midsummer afternoon when the sun seems to have found a niche in the sky it has no intention of ever abandoning. Lyle sat reading in a canvas sling-back chair on the dock. Tony was listlessly treading water around the dock's edges. He filled his cupped hands with water and poured it over Lyle's feet (p. 117).

The start of the next chapter announces that we have returned to the present: "Robert fell asleep on the lawn" (p. 123). At the end of Chapter 11 Robert is swimming in the river, and at the start of Chapter 12 it is Tony who is swimming in the same river.

The reader's sense of narrative order might be suspended for only a short paragraph before it is clear that it is again a narrative in the past we are attending to:

It was a large rock--a boulder--on a kind of shoal about a quarter of a mile upstream. Marian reached it first, drew herself up onto it, and lay down in the sun. She sat up when she heard Tony approach. "Come on, come on," she said (p. 135).

Chapter 16 begins, "Tony was shaving" (p. 152), and in Chapter 22, the penultimate chapter of the novel, and the last in which Tony appears, Tony is introduced quickly, in the second establishing sentence: "Lyle was in bed reading Sigrid's book. John and Marian and Tony were downstairs playing cards around the library table" (p. 217).

The other novel of those I am considering here that does not maintain strict correspondence between story and text is *Such Times*. When the novel begins Jasper, Timothy's lover, is already dead. The book is ordered in nine chapters:

1. Timothy is with Dominic. Jasper is dead.
2. Jasper, 1974. Timothy has just met Jasper.
3. Dominic. Jasper is dead. Many reflections on Jasper.
4. Jasper, 1980.
5. Dominic. Reflections on Jasper. Remembering Jasper's diagnosis.
6. Jasper's illness.
7. Dinner with Oliver Ingraham, Jasper's partner, after Jasper's death.
8. Dominic.
9. Timothy is with Jasper just before Jasper dies.

The narrative order, however, like that in *The Weekend*, is never unclear or confusing. Because the novel begins with Jasper already dead, it is always understood that an episode that includes Jasper is a recollection, a narrative of the past. Though the events are presented out of sequence, there is no sense that the order of events cannot be easily grasped. After announcing at the beginning of the novel that Jasper is dead, it is no surprise, given the convention of the novel's form that allows it to move back and forth at intervals between past and present, when Timothy invokes his first meeting with Jasper in present tense dialogue: "If you had found me fetching, you wouldn't have walked away," Timothy says. "But I do find you fetching," Jasper replies to Timothy (p. 28). By the beginning of Chapter 2, when Timothy has just met Jasper and is waiting for his telephone call, it has already been signaled in Chapter 1 that Jasper is dead, and so it is understood that this therefore is a narrative that takes place before the events at the opening of the novel.

The gay AIDS novels are not invested in reproducing chronological disruption, and "because the realistic novel generally remains faithful to chronological time, the very sequence of events becomes an ordering principle."⁵⁹ The gay AIDS narrative is more invested in giving order to events than in the mimetic recapitulation of the apparent anarchy involved in the processes of AIDS infection and illness.

Universal Narrative

However, even as the narrative of AIDS is unreliable, AIDS at the same time provides the *possibility* of narrative for those whose public identity has all along forbidden them from claiming a "universal narrative." The normative narrative of heterosexuality relies on the trajectory of birth, marriage, and death. Gay experience

⁵⁹Bersani, p. 240.

has not been amenable to that sort of narration, but AIDS makes it so. Prior to the era of gay AIDS fiction, the general “reading public had been willing to have its prejudices pandered to by fiction which presented homosexuals as villains or as tragic misfits, as effete foils to that variety of manly hero perfected by the Hemingway school or as local colour in sagas of war and foreign lands.”⁶⁰ The literature of AIDS, in its universal expressions of loss, provides a “common ground” of literary expression for a community that has been partially defined and contained by a critical absence of popular cultural as well as literary recognition and representation:

Before the turning point of the Second World War, homosexuality was almost a proscribed subject and so, for the most part, its literary history is a story of indirection, subterfuge, disguise, or outright suppression. Writers wishing to deal with such themes were under an obligation to censor their materials and camouflage their concerns if they were to run the gauntlet of publishers, watchful courts, reviewers, and the conventional expectations of readers, without offending any party along the way.⁶¹

The melodrama of a protracted illness that leads inevitably to death ironically provides gay men with a way in to an available universal narrative previously denied them. If “the history of the liberated gay community in America is divided into two phases,” the first “initiated by the Stonewall Riots in June 1969” and the second by “the advent of the AIDS epidemic at the beginning of the eighties,”⁶² it follows that “the literary heavy guns”⁶³ of early gay literature would still be pursuing, during the time of AIDS, the possibility of a recognizable and universal narrative that the same writers had been pursuing just before the time of AIDS. AIDS presents the possibility

⁶⁰Stephen Adams, *The Homosexual as Hero in Contemporary Fiction* (London: Vision Press, 1980), p. 17.

⁶¹Adams, p. 7.

⁶²Michael Denny, “AIDS Writing and the Creation of a Gay Culture,” in Pastore, p. 38.

⁶³Paul Reed refers to “the literary heavy guns--gay and straight” who after an initial period of silence were the first to respond in literature to the AIDS crisis. Reed, p. 93.

to these writers of a universal story. For example, the fact that both *Halfway Home* and *A Home at the End of the World* refer in their titles to the possibility of home and begin their narratives with references to family, show both the desire for and the inability to achieve such universal and even commonplace possibilities as home and family. Indeed, gay writers during the 1980s started more frequently to address “domestic life, and, increasingly, unusual family configurations.”⁶⁴ In *Halfway Home*, for example, the narrator, Tom, comes to be eager to reconfigure his old hatred for his brother, Brian, dismantling old family narratives and idealizing, as he is dying, new possibilities. While the novel begins with a reminiscence of how formidable and malicious his brother was to him when they were growing up, the narrative that ensues is the story of their reconciliation, Tom’s growing attachment to Brian’s son, Daniel, and his falling in love with Gray, all new and conspicuously familial attachments in a world in which he has formerly renounced what he refers to as “that family porn” (p. 2).

Allen Barnett’s story, “Philostorgy, Now Obscure,” opens with the disappointment of a home that Preston will have difficulty, particularly now that he is ill, returning to:

“Don’t go home yet,” Roxy said. “The stress will blow out whatever’s left of your immune system.”

“I’ll have to tell my mother sometime,” Preston said. “It would be cruel not to” (p. 34).

His reasons for his reduced expectations of family acceptance have to do with “the reception he had gotten twelve years before when he told his foster parents that he was gay” (p. 34), so “Preston did not anticipate the support that families give at moments like these” (p. 35). When at the end of the story his close friend Roxy asks if he

⁶⁴Neil Miller, *Out of the Past: Gay and Lesbian History from 1869 to the Present* (New York: Vintage, 1995), p. 478.

would “consider moving back here” to the apartment they used to live in together so that he “could be close to [his] family without having to live with them,” Preston can manage only to offer that he will “think about it” (p. 60), suggesting the ambivalence of wanting to be close to his family but expecting that his mother, for example, will only “mitigate his illness,” ask distractedly if they haven’t already “found a cure for that” (p. 35). It is his friend, Roxy, who asks him if he is “going onto DHPG” (p. 35), and, knowing that Preston has cytomegalovirus, knows also that “it was unlikely that a person with AIDS would only have CMV without the presence of another opportunistic infection” (p. 39). If the traditional family is unavailable, the characters in these novels pursue, and find, other formulations of family.

In Michael Cunningham’s *A Home at the End of the World*, the characters create an unusual but still “classic” family. Jonathan and Bobby, former childhood lovers, and Clare, with her daughter by Bobby, Rebecca, create a home together in upstate New York: “We worked out a variation on the classic arrangement, we three” (p. 340). Together they purchase “a two-story brown house five miles out of Woodstock” (p. 322) and they open a local home-style restaurant, “an eccentric little café that served honest food made by human hands” (p. 371). Reflecting on their days living together in New York, Bobby remembers

We took to calling ourselves the Hendersons. I don’t remember how it started--it was part of a line tossed out by Clare or Jonathan, and it stuck. The Hendersons were a family with modest expectations and simple tastes. They liked going to the movies or watching TV. They liked having a few beers in a cheap little bar. When we went out together, the three of us, we called it “A night with the Hendersons.” Clare came to be known as mom, I was Junior, and Jonathan was uncle Jonny. The story took on details over time. Mom was the boss. She wanted us to mind our manners and sit up straight, she clicked her tongue if one of us swore (p. 193).

But in Woodstock, Bobby notes, “We don’t talk about the Hendersons anymore, maybe because the difference between our actual lives and their hypothetical ones has shrunk below the measuring point” (p. 335). Their lives are consumed with the preoccupations of conventional families:

At dinner, we talk about the restaurant and the baby. Lately our lives are devoted to the actual--we worry over Rebecca’s cough and the delivery of our used-but-refurbished walk-in refrigerator (p. 334)

But even this unconventional version of a conventional family cannot be sustained. Clare leaves one day with Rebecca, leaves Bobby and Jonathan on their own in the house with the restaurant to run, and now also Erich, Jonathan’s erstwhile lover, dying, to look after. Yet even given the rupture created by Clare’s sudden departure Jonathan reformulates the home, calling in his parents to re-create a classic family when finally he decides to scatter his father’s ashes in the fields around the house: “If something happens to me,” Jonathan insists to Bobby, knowing that Erich’s demise might foretell his own, “this will be an all right place to put my ashes, too” (p. 412), and then suggests that when the time comes his mother’s ashes might be scattered there as well. “Right,” Bobby responds, “I mean, I guess so. This is where we all belong now” (p. 412). And Bobby believes that even though Clare has left, as members of families do sometimes leave, the family unit they created cannot be broken apart: “Rebecca will be back someday,” he reflects, “and the house will be waiting for her” (p. 407).

The desire for inclusion in universal feeling is ostensible in the narratives. While often the universal feeling from which the characters feel left out and try to reproduce is family, there is similarly an urgency to participate in and recapitulate normative versions of romantic love. This is something available they suspect to a

mainstream or straight constituency, but now, perhaps as AIDS has made clear what is lost, felt deeply as unavailable to them:

Love had seemed so final and so dull--love was what ruined our parents. Love had delivered them to a life of mortgage payments and household repairs; to unglamorous jobs and the fluorescent aisles of a supermarket at two in the afternoon. We'd hoped for love of a different kind, love that knew and forgave our human frailty but did not miniaturize our grander ideas of ourselves (Cunningham, p. 214).

Tom in *Halfway Home* is wistful for love: "For I've never loved anyone all the way through--or maybe it's no one has ever loved me back":

I want to be known. The quirks and the edges, the bumps and the hollows--I want somebody to see it all whole. And I want to have had years of that, even if it has to be over now. And I haven't. All I have had is two months here, six months there, wrestling with men who never quite fit. It's strange, I don't have such a bottomless well of self-pity about my illness, but about the man who never was, the hole in my heart goes all the way to China (p. 32).

And Preston, in "Philostorgy, Now Obscure," coming upon a letter from an old lover, considers, "[t]here were times when things, like love or a pact with life, seemed possible only in the past" (p. 53). Realist fiction often requires that very banal universalities, like remembering and lamenting love, constitute rudimentary narrative departures. As discussed earlier, conventional realism "prefers the average, the commonplace, and the everyday," the characters are "people without highly exceptional endowments, who live through ordinary experiences of childhood, adolescence, love, marriage, parenthood, infidelity, and death."⁶⁵ Yet a gay story can only strive toward realism in the sense that while such universalities can certainly be represented, as they are in the coming out story and in gay AIDS fiction, they can never be taken for granted. As Edmund White observes,

⁶⁵M. H. Abrams, *A Glossary of Literary Terms*, 4th ed. (London: Holt, Rinehart and Winston, 1981), p. 153. See also Edwin H. Cady, *The Light of Common Day: Realism in American Fiction* (Bloomington and London: Indiana University Press, 1971), p. 16.

The domestic novel, at least as it came to be written in the 19th century by everyone from Jane Austen to Henry James, is about characters who circle around one another, variously weighing fortunes and beauty, until the tightly woven plot ends with adultery (tragedy) or marriage (comedy). Now, gay life simply can't be horned into this high-button shoe.⁶⁶

But there is something now, ironically, universal about AIDS. "Love and death have always been the great subject of literature," continues White, "in its horrible way, AIDS combines both themes."⁶⁷ At last there is a universal signifier that applies equally to the lives of those who can be considered to dwell in the heterosexual mainstream and to the lives of gay men. "Realistic novels tend to end with marriages or deaths,"⁶⁸ and although gay fiction can only just approach the universally accepted narrative resolution of marriage, it can now participate in the universally accepted resolution of death at novel's end. AIDS arrives as the quintessential metaphor for what has been running through gay lives all along, and because of this access to a universal story there can be read in the gay AIDS fiction a conspicuous sense of relief. Now, for example, poetry and great literature make sense:

Preston finally realize[d] what Eliot had meant by mixing memory and desire, a combination so intoxicating, Preston feared the room would begin to spin, that he might need help out of his clothes and into bed, and his head held if he was to sleep (p. 53).

Indeed what the characters of these AIDS novels often do finally get rather than an enduring experience of "conventional" romantic love is an unconventional but still satisfying sense of family. Jonathan in *A Home at the End of the World* realizes that:

Erich and I were never in love; we weren't meant to be lovers. We had missed no romantic opportunity. Instead we'd hidden out together, in our good sex and undemanding companionship. We'd kept one another afloat while we waited (p. 391).

⁶⁶White, "Gay Lit," p. 196.

⁶⁷White, "Gay Lit," p. 196.

⁶⁸Bersani, p. 241.

But what he gets instead is his extraordinarily intimate relationship with Bobby:

“What binds us is stronger than sex. It is stronger than love. We’re related. Each of us is the other born into different flesh” (p. 332). About his brother Brian, Monette’s protagonist Tom declares that “it isn’t with any desire that I gaze across at him sleepily, drinking his beer. It’s this brotherly feeling, all the dots connected, and I’m basking in it” (p. 211).

Illness and dying are what make gay men in significant ways finally like everyone else. Gay AIDS fiction relies on the compulsion within realist narrative “for fictional characters to be constituted as typical or representative.”⁶⁹ Now, in death and loss, they are normal, they are like everyone else, they have a universal story, they are comprehensible in their sorrow and tragedy. AIDS literature has “made homosexuality a much more familiar part of the American landscape.”⁷⁰ AIDS gives the prior sense of loss and mourning a story, even a denouement and a climax, and therefore a narrative trajectory.

HIV rewrites the gay narrative, a private, even secret, enterprise, as a public story. Whatever complications there may have been in creating a gay narrative that either conformed to or departed from a universal narrative, there is now the urgency to construct a presentable story. What one owns or wears becomes the public narrative, because what one is represented by is one’s belongings, particularly as that is the main substance of one’s public identity once one is dead. One is making a story, that is, by what one chooses to leave behind. Of the possessions he is cleaning out of his apartment after learning his HIV diagnosis the protagonist, Preston, in Barnett’s short

⁶⁹Jenkins, p. 7.

⁷⁰Edmund White, “Out of the Closet, on to the Bookshelf,” *The Burning Library: Writings on Art, Politics and Sexuality 1969-1993*, David Bergman, ed. (London: Picador, 1995), p. 277.

story “Philostorgy, Now Obscure” remarks, “Better to throw it all away than to have someone find it, lay claim to it, or reduce his life to it” (p. 46). I will now turn to a consideration of the significance of such possessions for the working through of mourning pursued within gay AIDS narratives.

Objects and Mourning

The works of gay AIDS fiction I am examining are productions of an identity that pivots around the unrecoverable loss that is the obsessive focus of the work of mourning. A marked common feature in the gay AIDS fiction is a preoccupation with possessions, a common tendency to list attributes and possessions in a concerted effort to exercise control over what one has. Looking for something in the “battered leather box tooled in gold” Tom in *Halfway Home* uses for a “catchall,” he peruses “My UConn class ring, my upper retainer, my cock ring...buttons, shillings, subway tokens” (pp. 127-128). The tendency is not merely to mention objects but to list them, and listing is a way of staying connected to the daily, the mundane, the present, the minutiae that make up the totality of a life. In *The Weekend* one such list consists in a “little china dachshund from the White Mountains. A shadow puppet from Bali....an ivory shoehorn from a four-star hotel in Zurich” (p. 217).

Freud contends, in his essay “Mourning and Melancholia,” that mourning is a breakdown in object control. He identifies the attachment of the libido to another as an “object-choice.”⁷¹ Part of the work of mourning is to recognize the loss and to make a final break, as it were, with the lost object. It is “through a process of

⁷¹Sigmund Freud, “Mourning and Melancholia” (1917) in Angela Richards, ed., James Strachey, trans., *On Metapsychology: The Theory of Psychoanalysis*, The Penguin Freud Library, Vol. 11 (London: Penguin, 1991), p. 257.

‘reality-testing’ [that] the sufferer realizes that the object of love no longer exists.”⁷²

The work of mourning is wrought in these narratives through the activity of poring over possessions and deciding what to do with them. Listing possessions is part of the “reality-testing” that Freud marks as the work of mourning. It is through reality-testing “that the subject faced with the loss of a loved object learns to modify his personal world, his projects and his wishes in accordance with this real loss.”⁷³

A concern with objects is evidence of a mournful response to an unstable subjectivity. Focusing on objects as metonymic replacements for loss that is unnameable is an attempt to try to make the loss quotidian and therefore manageable and known. The preoccupation with possessions offers both a metonymic mechanism for the working through of mourning and also a narrative paradigm. In other words, the control over objects is analogous to the control that narrative offers over life’s disruptions.

In these novels the process of reality-testing is “carried out bit by bit, at great expense of time and cathectic energy.”⁷⁴ With some bitterness, Timothy in *Such Times* meticulously lists Jasper’s possessions, that is, his “remains”:

Jasper had overcoats, jackets, suits, shirts, sweaters, belts, shoes with shoe trees in them, scarfs, neckties, underclothes, Jasper had books, recordings, pictures on his walls--drawings, lithographs, silk screens, oils; Jasper had chairs, tables, he had rugs on his floors; he had dishes, glasses, crystal. He had a wine cellar well stocked with white Burgundies, red Bourdeauxs--*grand crus*, *premiers crus*, a few Sauternes, some magisterial Italian reds; a linen closet stocked with bath towels, hand towels, blankets, quilts (p. 32).

⁷²Juliana Schiesari, *The Gendering of Melancholia: Feminism, Psychoanalysis, and the Symbolics of Loss in Renaissance Literature* (Ithaca and London: Cornell University Press, 1992), p. 37.

⁷³J. Laplanche and J.-B. Pontalis, *The Language of Psychoanalysis* (London: Karnac Books, 1988), p. 385.

⁷⁴Freud, “Mourning and Melancholia,” p. 253.

However, Freud holds, the “demand [of reality-testing] arouses understandable opposition--it is a matter of general observation that people never willingly abandon a libidinal position.”⁷⁵ Indeed “raw consumer goods” are thought of as “comfort” (Monette, p. 172); unfailing: “Do you really think,” Timothy asks Dominic, “they’d get it wrong in a book that costs this much?” (Coe, p. 13); and able to bestow invincibility: “There were things, that when you bought them, made you feel immortal” (Barnett, p. 48). The objects are endowed by the characters, almost talismanically, with more power than the possessions, as inanimate objects, could possibly hold, as though they might forestall mortality.

Fort/Da

A list of possessions expresses a concern with what belongs to one and what is therefore in one’s control to keep or give away. The act of poring over possessions and deciding what to keep and what to give or throw away can be seen as an elaboration of the fort/da game that Freud observed his grandson playing, attributing to the game a paradigmatic narrative of despair, resignation, and control. The one-and-a-half-year-old boy, when his mother left the house, engaged in a game where he would take a small object and throw it away from himself, uttering the word *fort* (gone) and then retrieve the object saying *da* (there): “This, then, was the complete game--disappearance and return.”⁷⁶

“By a primitive form of mourning,” the mourning individual “not only comes to terms with...otherness and absence [but] he also learns to *represent absence*, and to

⁷⁵Freud, “Mourning and Melancholia,” p. 253.

⁷⁶Freud, “Beyond the Pleasure Principle,” (1920) in Angela Richards, ed., James Strachey, trans., *On Metapsychology: The Theory of Psychoanalysis*, The Penguin Freud Library, Vol. 11 (London: Penguin, 1991), p. 284.

make the absent present, by means of a substitutive figure accompanied by an elementary language.”⁷⁷ Control over objects is akin to the control exerted in the formulation of narrative. Indeed, “[f]ort-da is perhaps the shortest story we can imagine: an object is lost, and then recovered.”⁷⁸ Like Freud’s fort/da paradigm, going over possessions and deciding what to do with them is a form of control that one does not have over life, and that one feels acutely when one is ill, but does try to exert over life and death nevertheless. The fort/da game, like narrative, is *compensation* for loss:

The interpretation of the game then became obvious. It was related to the child’s great cultural achievement--the instinctual renunciation (that is, the renunciation of instinctual satisfaction) which he had made in allowing his mother to go away without protesting. He compensated himself for this, as it were, by himself staging the disappearance and return of the objects within his reach.⁷⁹

In the gay AIDS narratives, this “cultural achievement” is effected through a mastery over what is discarded and what is retained. In the story “Philostorgy, Now Obscure,” Preston gives away his belongings to exert some control over himself and how he will be remembered (how he will be reflected upon, perhaps). He gives a valuable hand-carved bowl to his old friend Jim: “I wanted to make sure you got it. You were the only person I knew who would appreciate it. I’ve been giving lots of things away: vases, polished shells, etchings” (p. 58). He wants to “affect [his friends’] memory of him, introduce himself anew and say, ‘This is me now’” (p. 47). The connections to his past invested in the small collection of worldly goods that Tom in *Halfway Home* imparts to his nephew-- “the final bit of evidence [that] departed here in the

⁷⁷Sacks, p. 11; emphasis in the original.

⁷⁸Eagleton, p. 185.

⁷⁹Freud, “Beyond the Pleasure Principle,” p. 285.

gold-tooled box with Daniel"--he decides he has "outgrown....Good-bye and good riddance" (p. 240).

Freud observes the child engaged in an extension of the fort/da game and the boy's discovery of his own control over the ability to reflect himself, or to be reflected, that is, even, to construct himself: "He had discovered his reflection in a full-length mirror which did not quite reach to the ground, so that by crouching down he could make his mirror-image 'gone.'"⁸⁰ Freud recognizes the leap from control over the existence or disappearance of objects to control over the presence and disappearance of the self: "during this long period of solitude the child had found a method of making *himself* disappear."⁸¹ In this sense the fort/da paradigm in these novels is also an exertion of ontological control: over being (living) and not being (dying). The cathected object becomes a locus now for multifarious losses, projected into various inanimate objects, but especially the anticipated loss of the self. In the novels lists of symptoms and the body's affected cells become a transitive focus of mourning that is ultimately about the lost self.

"It is clear," writes Freud, "that in their play children repeat everything that has made a great impression on them in real life, and that in doing so they abreact the strength of the impression and, as one might put it, make themselves master of the situation."⁸² In two of the narratives, among the "things" itemized are rather extensive "lists of things that could kill," that is, the opportunistic illnesses that anyone with HIV is vulnerable to:

Pneumocystis carinii pneumonia, Kaposi's sarcoma, lymphoma, toxoplasmosis, cryptosporidiosis, mycobacterium tuberculosis, cytomegalovirus, Hodgkin's disease, multifocal leukoencephalopathy,

⁸⁰Freud, "Beyond the Pleasure Principle," p. 284.

⁸¹Freud, "Beyond the Pleasure Principle," p. 284; emphasis in the original.

⁸²Freud, "Beyond the Pleasure Principle," p. 286.

encephalitis, cryptococcol meningitis--over twenty-five diseases that constituted a diagnosis of AIDS. She thought of wasting-away syndrome and dementia (Barnett, p. 48).

I have learned about reverse transcriptase, T-cells, B-cells, macrophages, pneumocystis carinii, lymphadenopathy, cytomegalovirus, histoplasmosis, toxoplasmosis, mycobacterium avium intracellular (Coe, p. 19).

However, these manifestations of illness are that which cannot be controlled, cannot be retained or discarded at will. The lists of objects, the disposal of precious possessions, are emblematic of Derrida's concept of *différance*: there is no getting to the one thing that is meant, it is endlessly deferred, the thing that can't be seen or held or known. Derrida suggests that "[w]e are dispossessed of the longed-for presence in the gesture of language by which we attempt to seize it."⁸³ There is a suggestion in the texts that the ultimate object is the virus itself, and that control over that "object" is what one is after. This is in evidence in Timothy's desperation to *see* the virus, to grasp it:

The image in *National Geographic* had been magnified to thirty-five thousand times its size....Three years later, I was able to see the virus without artificial colors. I saw it magnified to three hundred and fifty thousand times its diameter. This opportunity did not fall into my lap. I had to ask around and write letters and put myself out to make it happen. It took weeks to get an appointment with the scientist in charge of the electron microscope at the Pasteur Institute, in Paris.

It took persistence (Coe, p. 204).

His idea is that if he can grasp and understand the virus, he can control it: "I'd wanted to see the virus move. My idea was that if I could see the thing in motion. I would then know what it was that I had to try to stop." But, he reasons, "This was, of course, naive, grossly uninformed, but I didn't know that, so it didn't stop me" (pp. 204-205).

⁸³Jacques Derrida, *Of Grammatology*, Gayatri Chakravorty Spivak, trans. (Baltimore and London: The Johns Hopkins University Press, 1976; originally published in French in 1967), p. 141.

It has been suggested that “the mourner or elegist must submit to the mediating fabric of language, a tissue of substitutions that may cover a preceding lack.”⁸⁴ Along with lists there is a concern in these works with words and their precise meanings, their origins or etymologies:

A philodendron’s name implied self-love, he thought, if one was a tree. *Philo*, love; *dendron*, tree....Philharmonic, he thought, was love of music; philosophy, love of wisdom; philopolemic (rare), love of war or disputes. Philter was a love potion, philander actually meant fond of men. Philostorgy, meaning natural affection, was now obscure (Barnett, pp. 36-37).

This also is a representation of understanding, attempting to accept, that the possibility of ultimate control is always the next word, or object, or definition away. Timothy resigns himself for a moment to accepting that if “there hadn’t been the waves of dying; if there hadn’t been this virus,” then “I would still have lost Jasper, if only to the law, the duration, of mortality” (Coe, pp. 245-246). There is no definition or meaning, he momentarily understands, that can save them.

Objects and the Past

The reality-testing that is a requisite of mourning and that is meant to show “that the loved object no longer exists...proceeds to demand that all libido shall be withdrawn from its attachments to that object.”⁸⁵ Many of the objects discarded in the novels are vestiges, conspicuously, of the 1970s and 1980s, those things accumulated, that is, in the most recent formation of gay identity up until AIDS. Both Allen Barnett’s and Christopher Coe’s stories cite a particular T-shirt slogan proclaiming, SO MANY MEN, SO LITTLE TIME, “a popular T-shirt slogan in the very early eighties. No one wears them today” (Coe, p. 90; see also Barnett, p. 46). This is a slogan that could all too easily

⁸⁴Sacks, p. 18.

⁸⁵Freud, “Mourning and Melancholia,” p. 253.

be adapted, the tone of these narratives suggests, by appending the words “for” at the beginning and “left” at the end. For one critic it is precisely this slogan that epitomizes “the past that lights the memories in AIDS literature, the unabashed enjoyment of erotic pleasure.”⁸⁶ The objects are a link to the past, a gay past that is linked with sexuality and infection. Indeed, Gregory Woods suggests that the existence of such a slogan implies a prescience about what was to come:

The sweatshirt slogan “So many men, so little time” was our contemporary version of *carpe diem*: seize the day; eat, drink, and be merry, for tomorrow you die. It was a covert acknowledgment that, even at the heights of physical pleasure, we were nonetheless conscious of mortality.⁸⁷

“How much space should the past be given in a one-bedroom apartment?” Preston asks himself when cleaning out just these vestiges of bygone eras of his life (p. 46). AIDS shifts our understanding of what it is to be a gay man. Slogans and attitudes from the past are no longer available or appropriate. One changes one’s story by way of objects, and by defining oneself against the objects’ original meanings. “For Freud,” Schiesari explains, “the act of mourning is not only the affective reaction of grief to a concrete loss such as the death of a loved one; it is also the very *process* of recuperating the ego’s investment of libido in the lost object through a ritual of commemoration and farewell.”⁸⁸

Tom in *Halfway Home* pockets the “cockring” among his belongings when handing over his “catchall” to his nephew Daniel, leaving out precisely the antiquated sexuality that he associates with his own infection and illness. He is willing to leave out any sexual association, his own sexual history. Earlier in the story when Tom has

⁸⁶Clum, p. 651.

⁸⁷Gregory Woods, “AIDS to Remembrance: The Uses of Elegy,” in Emmanuel S. Nelson, ed., *AIDS: The Literary Response* (New York and Toronto: Twayne Publishers, 1992), p. 158.

⁸⁸Schiesari, p. 37; emphasis in the original.

only recently met Daniel and finds him working on a jigsaw puzzle of Michelangelo's David, he is horrified:

My eye darted frantically among the jumble of unassembled pieces, trying to find the crotch shot. I excruciated, in a daze of embarrassment, wanting to cover the boy's eyes or drag him bodily away. This stupid bohemian house! Why didn't it have a *normal* puzzle, a nice barn in Vermont? (p. 108).

He hopes he "could palm the piece with David's dick, so the assembled whole would sport a fig-leaf of negative space" (p. 109). He wants Daniel to know him healthy, though not whole, with his own "fig-leaf of negative space," specifically, with the absence of his sexuality. Similarly, Preston in Barnett's "Philostorgy, Now Obscure" recalls "a journalist whose neighbor had died of AIDS. The writer had described the contents of the dead man's garbage, reducing an entire life to a leather vest, chaps, and sex toys" (p. 46). Here are representative moments of the wavering confusion for gay men in the time of AIDS between a thoroughly sexual identity and an identity divested of sexuality, unnaturally devoid of any sexuality at all. While it was an "emphasis on sex that characterized life for many gay men in the seventies,"⁸⁹ gay men in the era of AIDS, as characterized by gay AIDS fiction, are trying desperately to be rid of a sexuality increasingly associated with illness and disintegration.

In *Such Times* Timothy's reminiscences of the Continental--"a bathhouse, popular in the early seventies," a venue for anonymous sex, and where "[a] little after ten o'clock on the Thursday evening just after Christmas eighteen years ago, Jasper and I, in towels, met" (p. 4)--constitute the bathhouse as a *lieu de mémoire*, a site of memory:⁹⁰

⁸⁹Miller, p. 426.

⁹⁰See Pierre Nora, "Between Memory and History: *Les Lieux de Mémoire*," in Geneviève Fabre and Robert O'Meally, eds., *History and Memory in African-American Culture* (New York and Oxford: Oxford University Press, 1994), p. 284.

The Continental has been gone for years, gone even before men in New York stopped going to bathhouses. But the address is still there, the same building, on Seventy-fourth Street just west of Broadway, and when I am in the neighborhood I will, more often than not, go a little out of my way to pass what used to be its door.

Sometimes I go far out of my way. I've been perhaps a dozen times this year. I used to go even when Jasper was alive. Just last week I went. The facade is unchanged. It is exactly as it was, though I have no idea what has been done to the inside or what goes on in there now (p. 4).

Lieux de mémoire are “*lieux* in three senses of the word--material, symbolic, and functional.”⁹¹ The references to the bathhouse are emblematic of a sexual identity that has been essential to the formulation of a personal gay identity and to the formulation of a gay community. As reflections on a lost form of sexual identity the ruminations on the bathhouses are ambivalent reflections, as the reflected upon sexual identity that is part of the narrative of self is a narrative that will end in illness and death.

These texts exemplify the way that “[e]ven an apparently purely material site...becomes a *lieu de mémoire* only if the imagination invests it with a symbolic aura.”⁹² Like Tom’s pocketed cockring in *Halfway Home* and Preston’s recollection of a journalist’s neighbor whose sexual paraphernalia are discovered after his death, the recollected baths are representative of a sexuality that is remembered ambivalently and now, in illness, largely divested and forsaken.⁹³

These recollections are also part of the process of reality-testing. “Although the exact workings of this economic process [of reality-testing] are said to remain obscure, the mourner, according to this scenario, seems to get rid of her or his affective charge in the lost object by rehearsing images of the past, thereby emptying

⁹¹Nora, p. 295.

⁹²Nora, p. 295.

⁹³Another character of popular gay AIDS fiction, B.J. Rosenthal of David Feinberg’s *Eighty-Sixed* (New York: Viking, 1989) and *Spontaneous Combustion* (New York: Viking, 1991), makes frequent references to the baths.

out the affect associated with it through the recollection of memories of the lost object.”⁹⁴ Reality-testing

demands categorically from the bereaved person that he should separate himself from the object, since it no longer exists. Mourning is entrusted with the task of carrying out this retreat from the object in...situations in which it was the recipient of a high degree of cathexis. That this separation should be painful fits in with [the] view of the high and unsatisfiable cathexis of longing which is concentrated on the object by the bereaved person during the *reproduction of the situations in which he must undo the ties that bind him to it*.⁹⁵

Divesting the power of objects and places from the past requires first that these objects and *lieux de mémoire* be revisited and then released: “Each single one of the memories and expectations in which the libido is bound to the object is brought up and hypercathected, and detachment of the libido is accomplished in respect of it.”⁹⁶

The work of mourning, then, is closely bound up with the formation and question of identity. The novels are part of a discourse in which identities are reconstituted. Schiesari suggests that “the work of mourning might be better understood as a *refiguring* of the ego’s relation to the object rather than a simple dismissal or disavowal of it.”⁹⁷ For example, as Lyle goes through Tony’s old possessions and the articles Tony wrote for travel magazines, he tries “to find in the familiar and trivial words some new, subliminal meanings” (Cameron, pp. 24-25). If there is new meaning to be gained from these old objects, the hope is that there may be a greater understanding of *who the one was* that created this state of affairs. The preoccupation in the novels with objects, personal possessions--what they mean and what is to become of them--is a preoccupation with a chain of metonymic signifiers

⁹⁴Schiesari, p. 38.

⁹⁵Freud, “Inhibitions, Symptoms and Anxiety” (1926), in Angela Richards, ed., James Strachey, trans. *On Psychopathology*, The Penguin Freud Library, Vol. 10 (London: Penguin, 1993), p. 333; emphasis added.

⁹⁶Freud, “Mourning and Melancholia,” p. 253.

⁹⁷Schiesari, p. 38.; emphasis in the original.

for what is lost and cannot be named. The clearing out of possessions is about *shedding* paraphernalia which has deferred any understanding of identity (and the identity of the one in the past who got infected) and the accompanying search to find symbolic representation for something that *will not* be symbolically represented: the search for that thing which *will* be a representation.

Determining what to keep and what to discard is a way of determining how one is to be known socially now, and not merely metaphorically by the objects one leaves behind. Looking at photos of him that his friend Roxy has attached to the wall, Preston in "Philostorgy, Now Obscure" remarks, "I wish she would burn all these....I don't want to be remembered like that" (p. 41). Cleaning out the objects, particularly the articles of an abandoned sexuality, can be seen as an analogue to cleaning out the virus inside, and is in that sense an attempt also to address the identity by which one acquired it. Douglas Crimp notes that gay men "are directly and immediately implicated in the particular cause of these deaths, and implicated, as well, through the specific nature of our deepest pleasures in life--our gay sexuality."⁹⁸ There is a sense, too, then, in this frenzied cleansing, that one is shedding and reclassifying the identities that led to the circumstances of becoming ill. It is not regret, but a sobriety invested in recognizing that one has a choice over who one is, and over how one represents oneself. In the midst of his post-diagnosis cleaning, Preston "thought about what people would find cleaning out his own apartment" (Barnett, p. 46).

Self and Non-self: Objects

The relinquishment of the object in the gay AIDS fiction is another way of identifying and confirming the sanctity and wholeness and vitality of the self: in casting away an

⁹⁸Douglas Crimp, "Mourning and Militancy," *October*, no. 51, Winter 1989, p. 9.

attachment, in defining oneself against the meanings of the renounced objects, one shows more than ever that one is still alive, even in the midst of pronounced loss and grief.

Within many of these narratives, characters wrestle with the realization that a germ,⁹⁹ a virus--that is, a foreign body--is inextricably attached to oneself, swarming within. What emerges from this wrestling is the recognition of a clearly identified self that can be invaded, and an external pathogen that invades. This identification of the infected body signals the onset of a perplexity about self and not self, about inside and outside: that is, about subjectivity. These books derive from an urgency to articulate and create a sense of self--a self as a gay man and a self as a mortal subject.

The attempt to exert control over the story's objects and possessions is an effort to exert control over the abject, that is, an attempt to determine what is inside and what is outside; "ideas about separating, purifying, demarcating...have as their main function to impose system on an inherently untidy experience."¹⁰⁰ Lists of objects and carefully depicted details compose a register that delineates the boundary between self and not self.

These novels, then, dwell significantly on the question of subjectivity and identity. HIV, the human immunodeficiency virus, contests the boundaries of the body in a way more extreme than other illnesses have. One reason for this is that HIV is the first retrovirus to affect humans. The retrovirus literally employs the body's own defenses to work against itself. The virus, by permeating the body's boundaries

⁹⁹Cindy Patton writes that "Germphobia is triggered whether or not there is an 'AIDS germ'" rendering "the human body...the site of a passionate battle between good and evil, order and chaos, health and disease." Cindy Patton, *Sex and Germs: The Politics of AIDS* (Boston: South End Press, 1985), p. 51.

¹⁰⁰Mary Douglas, *Purity and Danger: An Analysis of the Concepts of Pollution and Taboo* (London and New York: Routledge, 1995, first published 1966), p. 4.

and *becoming* the body, puts into question and illuminates the issue of what is self and what is not self. Many of these works are about mourning the loss of a boundary.

AIDS reinforces “the notion that bodies are neither sacrosanct nor inviolable, that they cannot be fully guarded against mutability or encroachment.”¹⁰¹ The struggle with subjectivity is the struggle with identity. The books often focus on material possessions because asking “What is mine and what isn’t?” is a way of asking “What is me and what isn’t?” “After the doctor had given him his diagnosis, Preston had gone home and begun to clean his apartment”:

He took blinds from the windows and soaked them in the tub. He took books from their shelves and wiped them with a damp rag. He polished brass and waxed wood and relined shelves with new paper till the apartment was astringent with the smell of powder cleanser and bleach. The cleaning was an addictive tonic that kept him going for three days (pp. 45-46).

But he is “[n]ot satisfied with surfaces”:

Into the night, Preston threw out record albums and photograph albums, school diplomas, high-school literary magazines, ribbons won at speech tournaments, his draft card (p. 46).

Gay male AIDS fiction tries to render the chaos of living with AIDS coherent. It does this not only by establishing a conventional narrative, but by re-establishing precisely the borders that the anxieties around AIDS are partly an anxiety about. Narratives are themselves borders because they mediate: they are mediations between AIDS as lived as chaotic and AIDS as structured into a coherent story. They are comforting borders, because they are familiar; they recapitulate the structure of a life story that was conceivable before AIDS. “It is only by exaggerating the difference between within

¹⁰¹Julia Epstein and Kristina Straub, “Introduction: The Guarded Body,” in Epstein and Straub, eds., *Body Guards: The Cultural Politics of Gender Ambiguity* (London: Routledge, 1991), p. 15.

and without...that a semblance of order is created.”¹⁰² This is further illustrated in the many incidents of swimming in these novels.

Swimming and the Abject

The psychic process documented by the endless displacement of recovery of what is lost, represented by the poring over personal possessions, is analogous to the work of recovering an essentially unrecoverable loss involved in dispelling the abject.

On the abject Julia Kristeva writes:

The abjection of self would be the culminating form of that experience of the subject to which it is revealed that all its objects are based merely on the inaugural *loss* that laid the foundations of its own being.¹⁰³

The abject not only has no name but no form. It has no boundaries, but “is a relationship to a boundary”:

The abject is what threatens identity. It is neither good nor evil, subject nor object, ego nor unconscious, but something that threatens the distinctions themselves.¹⁰⁴

While the discourse of material objects raises a confusion about subjectivity, the episodes of swimming common to an inordinate number of gay AIDS stories offer a narrative clarity in response to that confusion.¹⁰⁵ “Surrounding the AIDS epidemic

¹⁰²Douglas, p. 4.

¹⁰³Julia Kristeva, *Powers of Horror: An Essay on Abjection*, Leon S. Roudiez, trans. (New York: Columbia University Press, 1982), p. 5; emphasis in the original.

¹⁰⁴Kelly Oliver, *Reading Kristeva: Unraveling the Double-bind* (Bloomington and Indianapolis: Indiana University Press, 1993), p. 56.

¹⁰⁵There are also, notably, pre-AIDS gay narratives that feature swimming episodes, suggesting that gay identity has even prior to AIDS centered on a sense of self as boundaried, where inside and outside are definable and penetration-governed. See, for example, Christopher Coe, “Anything You Want,” in George Stambolian, ed., *Men On Men 2: Best New Gay Fiction* (New York: Plume, 1988). An interesting text to consider in this context is Alan Hollinghurst, *The Swimming-Pool Library* (London: Chatto & Windus, 1988), which was written during the time of AIDS but is set just before the onset of the epidemic.

has sprung a distantiating and self-denying discourse of self and other.”¹⁰⁶ There are numerous AIDS narratives that include, or even center on, episodes of swimming. Joseph Olshan’s novel *Nightswimmer* is a story of a man, living in New York in the 1990s, who for years mourns his lover who disappeared mysteriously one night when they were out together in the ocean for a midnight swim:

Now ten years have passed and I have been loved by others. And yet, after all this time, there’s a part of me that believes he’s out there swimming the thirty miles across the channel to Santa Rosa. There’s a part of me that believes one day he’ll break the cryptic embrace of that ocean. And so, no matter where I am, I remain exactly where I lost him.¹⁰⁷

In Michael Cunningham’s short story, “Ignorant Armies,” there are two episodes of swimming, one in childhood when the narrator, Charlie, swims with his friends Tim and Nancy, and one when the older Charlie chooses to remain out of the water when Tim, now ill with AIDS, swims with his lover Mark in his swimming pool:

“Come on, Charlie,” Tim says, and I say all right. Tim dives in, Mark follows. They send drops sparking up into the air. I’m about to follow, but I change my mind. Something closes in front of me--the moment doesn’t have enough room. I sit on the warm boards of the dock and watch them as they swim out. They speak to one another, laugh, speak again. I can’t hear what they’re saying.¹⁰⁸

Cunningham’s second novel, *Flesh and Blood* also contains a significant swimming episode, when a young boy, Ben, drowns, letting himself be swept into the current, when he is unable to accept that he is gay.¹⁰⁹ In Adam Mars-Jones’ short story,

“Remission,” a man ill with AIDS goes swimming during a short period of remission:

“I slipped into the coldest water I have ever touched. My body gasped and went on

¹⁰⁶Epstein and Straub, p. 12.

¹⁰⁷Joseph Olshan, *Nightswimmer* (New York: Simon & Schuster, 1994), p. 12.

¹⁰⁸Michael Cunningham, “Ignorant Armies,” in David Leavitt and Mark Mitchell, eds., *The Penguin Book of Gay Short Stories* (London: Viking, 1994), pp. 488-489.

¹⁰⁹Michael Cunningham, *Flesh and Blood* (New York: Farrar, Straus and Giroux, 1995), pp. 428-433.

gasping. The water was unexpectedly deep, too, considering it was so near the edge of the pond.”¹¹⁰

While this discourse of self and other takes the form of solidifying an already vague separation and distinction between marginal identities and mainstream identities, between homosexual and heterosexual, drug dependent and independent, and the infected and ill and the uninfected and healthy, out of HIV and AIDS has also sprung the more categorical discourse of self and other with regard to subjectivity--not just how one identifies in the discourse of identity politics, but what is self and what is not self, what is inside my body and what is outside, what is me and what is not me. The boundaries of the body become, not more fluid, but more defined as the language of invasion becomes the most popular, and is seen as the most useful language with which to manage the devastation of infection, of having once been whole and sterile, and now invaded and infected. The episodes of swimming that are common to many pieces of AIDS fiction in part are concerned with the preoccupation, made trenchant by the discourse of infection that AIDS and HIV produces, of where the boundaries of self lie.

HIV is an illness of a compromised immune system, the part of us that has been mythologized into the keeper of boundaries, having developed the “notion that the immune system maintains a clear boundary between self and nonself.”¹¹¹ If “the body has been understood to be constituted within and through a system of

¹¹⁰Adam Mars-Jones, “Remission,” in *Monopolies of Loss* (New York: Vintage International, 1992), p. 182, first published in Edmund White and Adam Mars-Jones, *The Darker Proof: Stories from a Crisis* (New York: Plume/New American Library, 1988).

¹¹¹Emily Martin, *Flexible Bodies: Tracking Immunity in American Culture--From the Days of Polio to the Age of AIDS* (Boston: Beacon Press, 1994), p. 53.

boundaries,"¹¹² the plunge into cold water represented in these novels recapitulates and accomplishes what the body itself is no longer capable of doing.

While in the gay AIDS fiction sickness--incapacity, not feeling oneself--blurs the distinction between life and death, there are episodes in many of the gay AIDS narratives that serve to establish for the characters a startlingly reinforced distinction between life and death. On a narrative level, *The Weekend*, in one instance, establishes a boundary between life and death through juxtaposed depictions of swimming episodes in the present, when in one chapter Robert accompanies Lyle in visiting Marian and John's home in upstate New York, with episodes from the past in a subsequent chapter, when Lyle's lover Tony was still alive and swimming with Marian, Lyle, and John in the same river years earlier. Most of the episodes in the gay AIDS fiction that have to do with swimming, though, involve plunging into water so cold that one is convinced of life.

While the virus renders the boundaries of the self permeable, these plunges into icy water serve to reinforce a reliable, if still specious, boundary. The insupportable but temporarily stabilized distinction between self and not self is confirmed in the thrilling and frigid submersion:

I'm hollering at the cold when it's still just at my ankles. I take a long stride past him and dive headfirst. It's unbelievably arctic, a thousand knives (Monette, p. 36).

These swimming passages mark sporadic recognition on the part of the swimming character of a self that is alive, alive because he can feel the terrible cold, can flail in it. If one is alive, one is still a self, an individual. Identity in this case is formed through testing physical boundaries, that is, finding a sense of self based on physical boundaries. One is rendered whole, never more in one's body. Even though it is the

¹¹²Stacey, p. 75.

body that brings one to the brink of death, of nonexistence, it also allows one to feel not so much alive, as not ill:

The sensation is very specific: it's the first time my body has not been crawling in months. I'm washed clean (Monette, p. 36).

The distinction between inside and outside is never sharper. The experience of immersion in icy water is a state whereby the figures can experience what they could not if they were ill. Boundaries of the body are marked for the individuals by being able to feel their skin. Their skin now is not penetrable, but a sharp mark of where their bodies begin and end:

A thin sheet of ice still floated on the water, no more than a membrane, invisible until I broke through it. I heard the small crackling, felt the ice splinter around me, and then I was plunged into unthinkable cold, a cold that stopped my breath and seemed, for a long moment, to have stopped my heart as well. My flesh itself shrank, clung in animal panic to the bone, and I thought with perfect clarity, I'm dead. This is what it's like (Cunningham, p. 62).

It is in this rupturing of the water's membrane that the body's borders are reinforced. Placing the abject "reminds us of the impossibility of fixing permanent or immutable boundaries between self and other."¹¹³ And it is, ironically, the approximation to a sensation of death, that accentuates the experience of vitality. When Bobby and Jonathan take the dying Erich "swimming," wading up to their knees into icy water, Erich mutters, "This is good...I mean, well, it feels very good" (p. 421), and Jonathan thinks, "It didn't feel good. It was torture. But I thought I understood--it was a strong sensation, one that came from the outer world rather than the inner" (p. 421).

A subject needs an "other," that is, an object. With a fluctuation in boundaries, what is "other" becomes confused, especially as the virus--outside--has come to be merged with the substance of the subject, inside. What these swimming

¹¹³Stacey, p. 76.

episodes point to are attempts to work through this newly emphasized ambivalence about subjectivity that is vividly introduced by the prospect of a virus, something that enters one, often sexually through an act of penetration, and cannot then be extracted. Swimming is in some important ways a metaphor for a plunge into the abject, that is, making it “other” by immersing oneself in it.

These swimming passages emphasize nakedness, but a nonsexual nakedness: Gray “turns with a grin, happily wet, then his eyes go wide. For I am already half-undressed, my sweat shirt on the sand, shinnying out of my jeans” (Monette, p. 36). In fact there is a common reference to the genitals seizing up, shrinking from the cold, that marks the body as invested in a self that is not necessarily sexual, or at least not sexual in the way one has previously known:

I don’t feel shy being naked now. My nuts have seized...and yet I feel the most insistent cockiness...I’m practically a man again (Monette, p. 36).

In the shower after his swim, Tom relates, “I actually pump my dick for a bit, and it even lifts its head a little,” believing at first that his manhood, his revived feeling of manhood, is, as old, connected to his sexuality as he has known it; however, he goes on:

But I have another secret building, much more exciting than a half-mast hard-on. I can hardly dare to put it into words, even to myself. But the feeling of having broken my leper status in the iceberg cold of a sunset swim--that holds. Toweling off, I can still see all my dalmatian spots, but they don’t assault me (Monette, p. 37).

It is a revised identity Tom is forming, motivated by his swim, that takes account of his illness and his body--his KS lesions, for example--but doesn’t depend on those things. There is something revelatory and dangerous about these cold swims, as though one is closer to nature and also to one’s natural or essential self. “I was still

holding [Erich's] hand," Jonathan narrates, "[f]or the first time I felt intimate with him, though we had known one another for years and had made love hundreds of times" (p. 420). Though an early episode of swimming in *A Home at the End of the World*, when Jonathan and Bobby were boys, was followed by their first sexual expression with each other, it is when they are adults that swimming introduces a nonsexual but essential self-understanding. During "what would in fact turn out to be [Erich's] last swim," Jonathan experiences something deep that has evolved, but is no longer, from something sexual. Standing in the "shallow platter of freezing water" with Bobby and Erich he muses:

I wouldn't say I was happy. I was nothing so simple as happy. I was merely present, perhaps for the first time in my adult life. The moment was unextraordinary. But I had the moment, I had it completely. It inhabited me. I realized that if I died soon I would have known this, a connection with my life, its errors and cockeyed successes. The chance to be one of three naked men standing in a small body of clear water. I would not die unfulfilled because I'd been here, right here and nowhere else (pp. 421-422).

Though the "abject haunts the subject long after it has been banished,"¹¹⁴ there is rendered in these swims a significant illusion of wholeness that allows the subject--the protagonist--to work through the changes wrought by impending illness and loss. The virus attacks the notion of a whole subject, of a clearly boundaried identity, in that infection with the virus--potential or actual--implies a penetrable body. What a man contemplating safe sex with another man is wanting to protect himself from is not merely infection but a battle with the permeability of the boundaries of his body and the fact that, potentially, his body might become unrecognizable and no longer his "own."

¹¹⁴Stacey, p. 76.

Conclusion

Gay AIDS fiction is not unlike pre-AIDS gay literature in some ways--though the emphasis is decidedly no longer on coming out--but similar in its connections to loss and grief, though now the loss is concrete and directed, and not the grievance of not being accepted. AIDS fiction does not supersede the era of the coming out tale; Paul Monette, for example, is able successfully to produce both. While known for chronicles of AIDS, he also won the 1992 U.S. National Book Award for his doleful coming out story, *Becoming a Man*.¹¹⁵ That he wins the award for the coming out story suggests that the coming out tale is now acceptable to a mainstream audience but not yet perhaps the gay AIDS narrative. Coming out stories still exist, then, and often told by the same authors. Edmund White has eminently produced both as well.¹¹⁶ AIDS, however, is the newest and perhaps keenest felt form of loss for gay men. The potential loss of the newly elaborated self from AIDS is both a personal and an ineluctably universal paradigm. The self that was propounded so strenuously with the coming out stories is now in danger of demise. The literature despairs over this potential loss just as the self has victoriously emerged.

Gay AIDS narratives not only make order out of the chaos created by the illness, death, and loss that comes from AIDS, but also act, presumably, as systematic reassurances to the readership, who just as badly want the myth of a coherent self reasserted. The mechanism of literary realism serves to create an integral narrative as a remedial response to bewildering loss, just as the narrative construction of time in gay AIDS fiction serves to counteract and remedy the disrupted time of illness. This

¹¹⁵Paul Monette, *Becoming a Man: Half a Life Story* (New York: HarperCollins, 1992).

¹¹⁶White's trilogy of autobiographical novels begins with the coming out *bildungsroman* *A Boy's Own Story* and concludes with the AIDS novel *The Farewell Symphony*.

is why these are the “classic” AIDS narratives, because they provide this seamless narrative that re-creates the myth of identifiable boundaries of self and other that AIDS and HIV and the paradigm of infection so fundamentally threatens. The creation of a seamless narrative is also a reaction to mourning, relying on a return to order out of disruption and a belief in and reliance on completion as an indication of restoration.

In the next chapter I will consider queer AIDS literature and its departure from gay AIDS fiction in considerations of identity, narrative, and relationship to loss.

Chapter 3

Queer AIDS Literature: The Hybrid Text

This chapter, like the thesis as a whole, is concerned with textual strategies that construct subjectivities and identities within the text. While in Chapter 2 the concern was with texts that were realist in orientation, constructing whole and coherent subjectivities out of the texts' characters and readers, in this chapter, through a formal analysis of the texts, I will demonstrate how the texts investigated here are postmodern, hybrid, and constitutive of a queer identity, as opposed to the texts in Chapter 2 that constituted a gay identity.

In this chapter and in the chapter that follows I will be examining the following texts: Hervé Guibert's novel, *To the Friend Who Did Not Save My Life*,¹ Carole Maso's novel, *The Art Lover*,² Edmund White's book with Hubert Sorin, *Sketches from Memory*,³ and two academic essays: Eve Kosofsky Sedgwick's "White Glasses"⁴ and Michael Lynch's "Terrors of Resurrection."⁵ Guibert's novel is generally taken to be a *roman à clef*, chronicling the demise of his friendships with Michel Foucault ("Muzil") and the actress Isabelle Adjani ("Marine"), the first through Muzil's death and the second through a series of betrayals. Described as "a

¹ Hervé Guibert, *To the Friend Who Did Not Save My Life* (New York/London: High Risk/Serpent's Tail, 1991, translation of 1990 edition by Linda Coverdale); subsequent references will be made parenthetically within the text.

² Carole Maso, *The Art Lover* (San Francisco: North Point Press, 1990), p. 15.; subsequent references will be made parenthetically within the text.

³ Edmund White and Hubert Sorin, *Sketches from Memory: People and Places in the Heart of Our Paris* (London: Chatto & Windus and Picador, 1994); subsequent references will be made parenthetically within the text.

⁴ Eve Kosofsky Sedgwick, "White Glasses," *Tendencies* (Durham, NC: Duke University Press, 1993); subsequent references will be made parenthetically within the text.

⁵ Michael Lynch, "Terrors of Resurrection, 'By Eve Kosofsky Sedgwick,'" in Judith Laurence Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* (Chicago: University of Illinois Press, 1993); subsequent references will be made parenthetically within the text.

species of intellectual thriller...in which the protagonist's actions are circumscribed and dictated by his own imminent death,"⁶ it is also a chronicle of the narrator's own struggle to lay claim to a vaccine that he believes will boost his dwindling immune system, but that is continually denied him by someone he has believed to be his friend. It is a story of betrayals, by others on whom the protagonist has relied and by his own body.

The Art Lover, Carole Maso's second novel, can be read as a fictional disquisition on art, its force and its consolations. Ostensibly haphazardly experimental, it is rather a meticulous collage of unusual elements for a novel, including art reproductions, newspaper clippings, and what appear to be violations of fictional form. Edmund White's book *Sketches from Memory*, "a little book," written with accompanying drawings by White's lover Hubert Sorin, is a "funny-sad look around our *quartier* that we finished just a week before [Sorin] died."⁷ Unlike the writing that White is best known for--his autobiographical fiction that makes up the trilogy of *A Boy's Own Story*, *The Beautiful Room is Empty*, and *The Farewell Symphony*--*Sketches from Memory* is a collection of anecdotal stories of his daily life with his lover Hubert. Finally, Sedgwick's and Lynch's essays are academic papers that are not necessarily unlike the authors' other writings. However, Lynch's article is most interesting for being written in the voice of Eve Kosofsky Sedgwick, as well as under her authorship. Sedgwick's essay, besides being an academic paper, is a memorial for Michael Lynch, who, by the time the paper is delivered, is still alive.

⁶ Gary Indiana, "Hervé Guibert's *To the Friend Who Did Not Save My Life*," *Let it Bleed: Essays: 1985-1995* (New York and London: Serpent's Tail, 1996), p. 192.

⁷ Edmund White, "Thinking Positive," *The Observer*, "Review," November 29, 1998, p. 1.

Published between 1991 and 1994, these texts, I will argue, are representative of an emergent queer identity, an identity “generally understood to have been popularly adopted in the early 1990s.”⁸ Though the years during which these texts are produced parallel the years in which the gay AIDS texts were also published, they are, for reasons that I will put forth here, constitutive of a queer, rather than a gay, identity.

Postmodern AIDS Literature

The texts considered in this chapter are hybrid. That is, they draw on more than one genre to create a memorial and a work of literature that will be, to the authors, representative of their experiences of AIDS and the losses associated with AIDS. There is no one genre for these authors that will accomplish this. Hybrid texts are characterized by a conspicuous inability on the part of the text to accept containment within one genre. These are not the first texts to exhibit the form of crossed conventions, but they use it to a new purpose: to escape the referentiality and sentimentality of the realist novel, but still to express grief over the illness and loss of loved ones, and the deepening recognition of the author’s own mortality. They are therefore, because of their reliance on bricolage to create a narrative, postmodernist in orientation. “[P]ostmodern fiction calls into question most of the formal elements of narrative that an earlier mode took for granted.”⁹ But because they are caught up also with a bricolage of sexual identity, as well as with that of genre, I will argue that they can be considered queer in orientation as well as postmodernist. Queer, as I will

⁸ Annamarie Jagose, *Queer Theory: An Introduction* (New York: New York University Press, 1996), p. 76.

⁹ Thomas Docherty, “Postmodern Characterization: The Ethics of Alterity,” in Edmund J. Smyth, ed., *Postmodernism and Contemporary Fiction* (London: B.T. Batsford, 1991), p. 169.

show, encompasses a sensibility of transgression that is basic to an ascription of “postmodern,” but also a discourse of sexuality, and additionally of illness that is commonly and increasingly associated closely with sexuality.

Postmodernism has come to refer in literary analysis to fiction that exposes its fictionality in the course of the text in a way that suggests that life, or history, is as much a fictional construction as is the novel. Though the debate about what constitutes postmodernist literature is ongoing, I have found the following distillation useful and appropriate to the texts I will consider here. There are four elements said by one theorist of postmodernist literature (echoing others) that comprise postmodernist fiction. First, it comes after modernism, and partially defines itself as a move away from or rejection of modernism. While modernist writing was defined partially by a tendency toward quotation of other’s texts, often from earlier literary periods, illuminating the structural and contextual aspects of literature, postmodernist writing will expose its very nature as invention, constructed not only out of fragments of other texts, but also out of myriad genres, and therefore confounding narrative authority. Second, the philosophical aspects of postmodernist fiction are poststructural in that it shows that meaning is indefinite and that reality is constructed through language. The third element is ideological in that postmodernist fiction harbors a design to unsettle the reader’s sense of reality. In confounding narrative authority, the postmodernist text questions not only the boundaries within literature--posing the queries, “what is fiction?,” “what is nonfiction?,” or “what is allowed to happen within the confines of a text that presents itself as realist?”--but also outside of literature, as in the query, “if such a narrative is exposed as constructed within a text then what extratextual narratives might also be ‘constructed’”? These

questions in turn might lead to such musings as, “perhaps there is nothing outside a text,” that “the border between a novel and ‘reality’ is as arbitrary as that between fictional genres.” The fourth element of postmodern literature is that the “textual strategies which it employs...are designed to foreground the textuality of the fiction.”¹⁰

The literary texts considered here can be categorized as postmodern by their adherence to these four criteria. Though they do not overtly distinguish themselves by their departure from a modernist style, in that modernism too gestured toward the exposure of the structure of a work of literature, they do however employ the amalgamation of genres and self-exposure that marks them as postmodernist rather than modernist. In adherence to the second criterion, they all maintain, to some degree, a post-structural attitude that suggests reality is constructed through language. The third criterion is, however, what is most evident in these texts, in that the borders not only of the literary genres, but between what is literature and what is outside the text, are blurred. Thus for instance for Guibert in *To the Friend Who Did Not Save My Life*, language rendered through the written word of his books, his “schizoid willingness to locate his salvation in literature,”¹¹ is what makes his life real, what allows him to survive: when he writes that his “book is battling the fatigue created by the body’s struggles against the attacking virus” (p. 58), he is suggesting that literature (and especially the narratives one creates for oneself) is his antidote to illness. In his text accompanying Sorin’s drawings, Edmund White’s sense of his life with Sorin is constituted by the sketches he creates of their life in Paris. The reality he evidently most wants--one in which Sorin is not ill--is conjured throughout his writing and

¹⁰John Mepham, “Narratives of Postmodernism,” in Smyth, p. 138.

¹¹Indiana, p. 194.

Sorin's illustrations. For example, White admits in the introduction to their sketches that

[d]uring the last three months we had to give Fred our basset hound to Hubert's brother in Nice because Hubert could no longer go down the five flights and I couldn't take care of both Hubert and Fred; but in our book we remain an eternal trio, our silhouettes against the Tour St-Jacques (p. 8).

While reality is constituted in the writing, so too is the text at all times clear about its own existence as words or images on paper, fulfilling the fourth criterion of postmodernist literature. White's introduction to *Sketches from Memory* expounds on the provenance of their joint work and the development of their collaborative sketches as Sorin's illness progressed: "He did the cover and I completed all the texts just before we set off on a last trip to Morocco" (p. 4). Guibert's and White and Sorin's texts often refer to their existence as words to be read, or words written in the hopes of survival.

Maso's novel best exemplifies Docherty's third criterion of what constitutes postmodernist literature in unsettling the reader's sense of reality, mostly by confounding the reader's sense of fiction. Because many layers of Maso's novel promise that it is more real or authentic--more true to the details of the writer's life, for example--than the last, the reader can't help but be thwarted in his or her attempts to grasp the most "genuine" layer, thereby recognizing the equally fictive or narrative nature of the world outside of books. Literature like that of Guibert's, White's, and Maso's that thinly disguises and boldly suggests the connection between the events of the narrative and the authors' lives most conspicuously erases the textual borders between literature and life. If it is hard to tell what is fabrication and what is autobiography then it is easier to see how similar the two are, that is, how much

literature necessarily incorporates the writer's life and how much life is textual, as literature.

While some of the AIDS literature that I examine here claims to be fiction--particularly Carole Maso's book *The Art Lover*, and also Hervé Guibert's book *To the Friend Who Did Not Save My Life*--not all of them make this claim. Edmund White and Hubert Sorin's book *Sketches From Memory* is indeed a series of "sketches," in words and illustrations, that together represent a certain whimsical aspect of White and Sorin's daily life in a particular neighborhood in Paris. Eve Kosofsky Sedgwick's and Michael Lynch's pieces--"White Glasses" and "Terrors of Resurrection," respectively--are presented as academic essays. It might seem strange that I am looking at two academic essays among other works that can more comfortably be considered literary texts. However, both Sedgwick and Lynch write experimentally, and their work, the way it is formulated and presented, goes beyond what might be typically considered representative of an academic approach or argument. Further, Lynch's essay is interesting in how it interacts with the writing of, and the academic figure of, Eve Sedgwick. Sedgwick's writing precisely foregrounds an instability between the fictional and the real that is the basis, I will argue, for the designation of this literature as queer. Additionally, Sedgwick is a paramount figure in considerations of the term "queer." Her work has described and established a paradigm for queerness, "signaling a shift in her work from concerns identified with gay and lesbian studies to concerns identified with queer theory."¹² Indeed not only does Sedgwick's book *Tendencies* signal the move to queerness of her own work, but it "exemplifies the expansion of gay and lesbian studies into queer theory."¹³

¹²Tim Dean, "On the Eve of a Queer Future," *Raritan*, Vol. XV, no. 1, Summer 1995, p. 116.

¹³Dean, p. 116.

Additionally, it is also Sedgwick's writing of her breast cancer, I will argue, that makes her and her writing queer.

These texts follow a tradition of postmodernism in the sense that they are ambivalent about the nature of the authorial self and the correspondence between "reality" and fictional representations. Postmodernist theory and literature draw attention to the self as a construction, in the same way that a literary text is a construction: "That the self can no longer be considered a unified and stable entity has become axiomatic in the light of poststructuralism."¹⁴ Although the texts under consideration seem perfectly to adhere to qualifications that would render them postmodern, it is their intervention into questions of identity and identification, specifically sexual identity--and also, I will argue, their being so acutely engaged in, and therefore products of, the circumstances of illness--that makes me want to characterize them, not exclusively as postmodern, but also as queer.

Queer

"Queer," as it has come to be discursively reinvented could itself be said to be postmodernist in orientation.¹⁵ Queer is an aggregation of identities and behaviors in that it emerges from gay and lesbian culture and history, both highlighting and expanding those identities and behaviors. Like postmodernism, queer defines itself largely by what it is not: "Queerness...is a quality related to any expression that can

¹⁴Edmund J. Smyth, Introduction, in Smyth, ed., *Postmodernism and Contemporary Fiction*, p. 10.

¹⁵Originally an epithet, queer has been reclaimed by the individuals against whom the slur has historically been directed. Like some racial slurs that have been similarly recovered by the targeted group, the power of words to inflict insult or harm is deflated when the words are claimed for self-identification. Queer, however, is more than just a word transformed into linguistic resistance, but stands for an expanded identity among those who wield it.

be marked as contra-, non-, or anti-straight”¹⁶; it is not straight or heterosexual (though one can be heterosexual and queer), it is not exclusively gay or lesbian; it cross-dresses and generally cross-identifies. It is post-gay, and it defines itself in opposition to gay identity--“[q]ueerness can be seen as an oppositional stance”¹⁷--but it also includes gay identity. Alexander Doty characterizes queers as “binary outlaws,”¹⁸ indicating that queer supersedes and expands the binaries of gay and straight, and even the binary gay and lesbian. Postmodernist and queer are umbrella terms that include and expand the original terms of delineation.

In sexuality studies the term “queer” is everywhere found but generally only vaguely defined, its parameters given obscurely. This might be because “queer” and “gay and lesbian” are different *kinds* of identifications. The identifications “gay” and “lesbian” rely on a particular identity--“as objective, empirical categories governed by empirical rules of evidence”¹⁹--one that is based on certain acts, for example whom one has, or wants to have, sex with. “‘Queer’ seems to hinge...on a person’s undertaking particular, performative acts of experimental self-perception and filiation.”²⁰ The “transition from antecedent terms such as *gay* and *lesbian* to the term *queer* has significantly altered the scope of inquiry to include a larger range of deviant sexualities.”²¹ Queer is a performance, not in the sense only of sex acts, but in the sense of producing its parameters as it goes along: “A word so fraught as ‘queer’ is...never can only denote; nor even can it only connote; a part of its experimental

¹⁶Alexander Doty, *Making Things Perfectly Queer: Interpreting Mass Culture* (Minneapolis and London: Minnesota University Press, 1993), p. xv.

¹⁷Moe Meyer, “Introduction: Reclaiming the Discourse of Camp,” in Meyer, ed., *The Politics and Poetics of Camp* (London and New York: Routledge, 1994), p. 3.

¹⁸Doty, p. xvi.

¹⁹Sedgwick, “Queer and Now,” *Tendencies*, p. 9.

²⁰Sedgwick, “Queer and Now,” p. 9.

²¹Scott Bravmann, “Queer Historical Subjects,” *Socialist Review*, Vol. 25, no. 1, 1995, p. 49.

force as a speech act is the way in which it dramatizes locutionary position itself.”²²

The historian Donna Penn ponders the fact that “the label ‘queer’ no longer requires identification with or engagement in homo-sex.”²³ Queer obscures the gender of the person who is desiring and who is desired: “Queer theory, unlike lesbian theory or gay male theory, is not gender specific.”²⁴ So while queer exposes the performative constitution of sexual identity, it also obscures what one is likely to think of as more primary identifications, like gender. By exposing the construction of identity it also modifies the constitutive categories of identity.

The following description of queer could in some ways be also recognizable as a description of postmodern:

What “queer” signals is an ontological challenge that displaces bourgeois notions of the Self as unique, abiding, and continuous while substituting instead a concept of the Self as performative, improvisational, discontinuous, and processually constituted by repetitive and stylized acts.²⁵

However, the difference is that while postmodern, with regard to literature, refers to an attitude whereby historical notions of literature and the text and readership are restructured and challenged, queer is specifically about the self, about self-identity, and about self-identity as it is constructed and performed specifically with regard to sexuality. One of the ways this sexual self-identity is refashioned and exposed is through literature. Queer addresses the social domain and is concerned with the sexual identity of the author and, by implication, the reader. The literature that participates in this discourse is queer.

²²Sedgwick, “Queer and Now,” p. 9.

²³Donna Penn, “Queer: Theorizing Politics and History,” *Radical History Review*, Vol. 62, Spring 1995, p. 34.

²⁴Sue-Ellen Case, “Tracking the Vampire,” in Teresa de Lauretis, ed., *differences*, Vol. 3, no. 2, Summer 1993, p. 2.

²⁵Meyer, pp. 2-3.

A literature that is postmodernist in style and is concerned primarily with issues, identities, and eventualities surrounding and constructed by AIDS and HIV, is queer. Gay literature also participates in the construction of a public (performed) sexual identity, but not with the same self-consciousness about hybridity of genre or textuality, and this marks the difference. Though occasionally the rest of this chapter will rely on the term “postmodernist” as a useful description of the literature examined, queer will be the most appropriate and advantageous delineation.

Illness and Queer Identity

I would like to show here that the conflation of AIDS with gay identity serves to place AIDS in a metonymic relationship with queer. Having AIDS may not make you gay, but it does make you queer; even an association with AIDS--participating in AIDS activism, for example--can make you queer. Further, in these representative texts, it is not just AIDS that makes one queer, but illness, especially any illness that is both associated with sexual identity and is considered, as AIDS is increasingly considered (or imagined) to be, both chronic and manageable. There has been some attempt to connect breast cancer, for example--through the politicization of the illness and the solidarity of community to fight illness and stigma together--to lesbian identity (if not in mainstream discourse, then certainly in discourses of illness and sexual identity), partly in an effort to parallel the activism that people with AIDS ignited in response to perceived government and medical indifference.²⁶ Sedgwick notes that, modeled on

²⁶There are not many books available on the politics and cultural meanings of breast cancer. One classic however is Audre Lorde's *The Cancer Journals* (San Francisco: Spinsters, 1980), which was followed by her book on having cancer, *A Burst of Light* (Ithaca, NY: Firebrand Books, 1988). Lorde, a black lesbian feminist who died of breast cancer in 1992, has been an icon of lesbian identity and a role model for lesbians. At the same time, “Lorde is mentioned in almost every book addressed to women undergoing treatment for breast cancer: in books by doctors, survivors, by

AIDS activism, there has developed “an activist politics of breast cancer, spearheaded by lesbians.”²⁷

Illness can be considered queer because, along with calling into question gender and sexual identification, it straddles the two states of being of life and death.²⁸

Only a few illnesses allow one to be at the same time perceptibly ill and well--namely

cancer activists,” Melissa F. Zeiger, *Beyond Consolation: Death, Sexuality, and the Changing Shapes of Elegy* (Ithaca and London: Cornell University Press, 1997), p. 135. Further, there has been recently a small surge of books on the politics of living with breast cancer, written by or with reference to lesbians: Sandra Butler and Barbara Rosenblum, eds., *Cancer in Two Voices* (Duluth, MN: Spinsters Ink, 1991); Judy Brady, ed., *One In Three: Women with Cancer Confront an Epidemic* (Pittsburgh and San Francisco: Cleis Press, 1991); and Midge Stocker, ed., *Cancer as a Women's Issue: Scratching the Surface* (Chicago: Third Side Press, 1991). A more recent book that addresses lesbianism and cancer (though not specifically breast cancer), including a provocative analysis of “the parallels between [her] experiences of the C word and the L word” (p. 68) is Jackie Stacey's *Teratologies: A Cultural Study of Cancer* (London and New York: Routledge, 1997). Another recent book, written from the perspective of “a fifty-eight-year-old white Jewish fem lesbian woman with [colon] cancer,” is Joan Nestle, *A Fragile Union: New and Selected Writings* (San Francisco: Cleis Press, 1998). See also the U.S. cover story of “The National Gay and Lesbian Newsmagazine,” “Lesbian Plague?” *The Advocate*, Issue 743, September 30, 1997; and in another issue of the magazine B. Ruby Rich's essay of lament that “[w]e lose thousands of lesbians each year to this disease.” “In Sickness and Health,” *The Advocate*, Issue 752, February 3, 1998, p. 43. In many cases it is lesbians who are paving the way for a discourse on the politics of breast cancer (and other cancers), including demands for greater awareness, treatment, and intervention. Also, because lesbians are less likely to seek gynecological services because they do not require birth control, are thought not to require safer sex information, and because they have historically not borne children, lesbians generally are less likely to receive early detection of breast cancer symptoms. Additionally, not bearing children is thought to put a woman at greater risk for developing breast cancer. These are among the reasons why breast cancer is increasingly propounded as specifically a lesbian issue and within certain contexts as a lesbian illness. In 1998, the publishers of *Poz*, a magazine addressed to an HIV-infected readership, began publishing *Mamm*, a magazine aimed at a readership with breast cancer; that the same publisher is aware of and addressing these two particular constituencies establishes this link between AIDS, already identified as a “gay illness,” with breast cancer, its lesbian counterpart. It is of further interest that with the magazine's third issue, Eve Kosofsky Sedgwick is introduced as a regular contributor to the magazine: as an advice columnist. *Mamm*, February/March 1998, p. 34.

²⁷Sedgwick, “Queer and Now,” p. 15.

²⁸Sue-Ellen Case suggests that queer challenges not only sexual identity but “the borders of life and death.” Case, p. 3.

chronic manageable ones like AIDS and cancer, both illnesses, particularly in Sedgwick's essay, connected to some degree to issues of sex and sexuality. This parallel between the illnesses is broached, for example, in Sedgwick's reference to her "legible bodily stigmata not of AIDS but of a 'female' cancer whose lessons for living assertively and powerfully with I find myself learning largely from men with AIDS."²⁹

One article on lesbians and breast cancer wryly admits that though "there is nothing inherently carcinogenic about lesbianism," the "nascent lesbian breast cancer movement" was formed in response to the understanding that "AIDS was thought of as a 'gay-specific' disease." "There was a desire," the article continues, "for a greater sharing of the community's resources, to see these as 'his-and-hers' epidemics."³⁰

Sedgwick writes that "[o]ne of the first things I felt when I was facing the diagnosis of breast cancer was, 'Shit, now I guess I really must be a woman'" (p. 262). Further, she writes,

as a person who has been nonprocreative by choice, and whose sense of femininity, whatever it may consist in, has never been routed through a pretty appearance in the imagined view of heterosexual men--as a woman moreover whose breast eroticism wasn't strong--I was someone to whom these mammary globes, though pleasing in myself and in others who sported them, were nonetheless relatively peripheral to the complex places where sexuality and gender identity really happen (p. 262).

Though, for Sedgwick, breast cancer is highly involved with "exactly the issues of gender, sexuality, and identity formation that were already on my docket,"³¹ she still

²⁹Eve Kosofsky Sedgwick, "Socratic Raptures, Socratic Ruptures: Notes Towards Queer Performativity," in Susan Gubar and Jonathan Kamholtz, eds., *English Inside Out: The Places of Literary Criticism* (New York and London: Routledge, 1993), p. 128.

³⁰Liz Galst, "Lesbians May Have Greater Risk Factors than Other Women but More Research Is Needed," *Mamm*, December/January 1999, pp. 48 and 49. For further "comparison" of how gay men with AIDS and lesbians with cancer have been disproportionately represented see B. Ruby Rich, p. 43.

³¹Sedgwick, "Queer and Now," p. 12.

feels “[i]n the day-to-day experience...of living with and fighting breast cancer...inconceivably far from finding myself at the center of the mysteries of essential femaleness” (p. 263). The point is that breast cancer, “because it occurs in that iconic lump of flesh--both erotic and maternal--...has deep repercussions for the way patients understand their gender identity.”³² Insofar as queer “describes those gestures or analytical models which dramatise incoherencies in the allegedly stable relations between chromosomal sex, gender and sexual desire,”³³ it is the enforced interrogation of gender identity involved in a diagnosis of breast cancer that makes it a candidate for consideration as a queer illness.

In his essay, “Terrors of Resurrection,” Lynch (he is writing in 1988) comments on the general inability to disassociate AIDS from the language and the ideology of “terror, of panic, of death, of resurrection, of apocalypse (p. 81)” But not only, he writes, are we unable to speak of AIDS that is not “firmly ligatured to death” (p. 82), but, he suggests, we may not want to. Just as queer is seen still as a marginal identity and uneasily adopted, even for some gays and lesbians, so is it difficult to accept illness as an identity, as an identification with a phase of life that is more than an interval between health and death. Lynch provides a long list of interventions, not into the fatality of AIDS, but into the swiftness with which one dies once one has AIDS:

There is AZT. There are other antiviral or immune-boosting pharmaceuticals. There is aerosolized pentamidine, proving successful as a prophylaxis against pneumocystic pneumonia. There are diagnostic procedures that do not require the long wait for symptoms. There are strategies of early intervention (p. 82).

³²Alisa Solomon, “The Politics of Breast Cancer,” *Camera Obscura*, Vol. 28, January 1992, pp. 158-159.

³³Jagose, p. 3.

But there is resistance, writes Lynch (in the voice of Sedgwick), to thinking of AIDS as chronic or manageable:

we have shifted from the apocalyptic to the potentially manageable. This is very good news. There is, however, as Lynch and his activist cronies try to puzzle out, a very powerful resistance to hearing this good news (p. 82).

There are terrors to AIDS as chronic and manageable, too, not only to AIDS as fatal, as an oracle of doom: Lynch comments on “the unexpected terrors of this welcome rearrangement” (p. 83).

There is indeed resistance by the other authors considered here to the idea of AIDS as chronic and manageable. Sometimes the resistance can take the form of disbelief or surprise: “I kept thinking he’d live on and on,” Edmund White writes of his lover Hubert, “I’d been diagnosed as HIV positive in 1985 and my health had in no way deteriorated” (p. 4). And Sedgwick, in her essay “White Glasses,” is amazed that Lynch, who is dying, and for whom she writes the essay as an obituary in anticipation of his death, does not die but gets better: “So I got everything wrong” (Sedgwick, p. 255). At other times, resistance can take the form of more blatant rejection: “I suppose I let myself be seduced by the current cant about AIDS becoming a manageable chronic disease like diabetes.” However, White continues, “It’s no such thing, but I was encouraged to hold on to this fantasy by my love for [Hubert] and my fear of losing him” (p. 4). As Lynch suggests, it is difficult ontologically for the figures in these works to embrace interruptions of the solid and more familiar identities of either health or death. Although Guibert writes that since their diagnoses “Jules and I now found it really difficult to fuck each other” (p. 140), when they do have sex,

I felt as though Jules and I had gotten lost between our lives and our deaths, that this no-man's-land, ordinarily and necessarily rather nebulous, had suddenly become atrociously clear, that we were taking our places, through this physical coupling, in a macabre tableau of two sodomitical skeletons (p. 141).

AIDS in these works causes a confusion about the borders of identity that normatively are prescribed and that queer challenges, insofar as “queerness has been set up to challenge and break apart conventional categories.”³⁴

If queer is a straddling of identities--a hybrid of identities--closely associated with questions of gender identification and sexuality, and if AIDS--and also breast cancer--have come to be associated with marginal, or transgressed identities of gender and sexuality, then these illnesses--because they are so often circumscribed by issues of gender and sexual identity and because they are a hybrid moment of two ontological states (life and death)--are queer: to have AIDS or to have breast cancer in the queer AIDS literature is to participate to some extent in the identification of queerness.

Illness = Queer

I would like to show that these texts are queer to the extent that they unfold in the realm of illness. I will illustrate what I mean using the essay “White Glasses.” Eve Sedgwick identifies as queer, and hers has become a name recognizably associated with queer studies.³⁵ She is known to be married to a man and is often identified in the gay press (sometimes resentfully) as heterosexual (resentfully, as in: what right does a straight woman have to be telling us what it means to be queer, never mind

³⁴Doty, p. xv.

³⁵See, for example, “Queer Icons: Queer Studies,” *Pink Paper*, August 23, 1996, p. 39 (where she is referred to, erroneously, as a “dyke theorist”).

setting the discursive standard for what queer might comprise?³⁶). The book that first gave her recognition as a theorist of gay subjects was *Between Men*. There is nothing queer about this book: for one thing, it pre-dates use of the term queer in its current incarnation. In the 1992 preface to that book Sedgwick writes:

From the 1990s vantage of an elaborated and activist gay/lesbian studies scene in academia, a vocal and visible national gay/lesbian movement, and...an emerging, highly productive queer community whose explicit basis is the criss-crossing of the lines of identification and desires among genders, races, and sexual definitions, it's hard to remember what that distant country [before queer] felt like.³⁷

Even her next book, *Epistemology of the Closet*,³⁸ though innovative in the discourse of gay studies, was not recognizably queer, nor did the word feature significantly in the text.³⁹ It is in *Tendencies* that there is evidence for her status as the doyenne of queer. *Tendencies*, published in 1993, is a collection of essays most of which were first published elsewhere. "White Glasses," published in 1992, was originally presented at the CUNY Center for Lesbian and Gay Studies on May 9, 1991, in the year that "queer theory sweeps colleges and coffeehouses."⁴⁰ It is not only that she uses the term queer, or even that she identifies as a gay man that makes her queer (though certainly this is tantalizing testimony), but there are, I propose, two circumstances that construct Sedgwick's identification as queer, both made public by

³⁶For example: "what is a married heterosexual woman doing at the epicenter of the queer studies boom?" and "Sedgwick's alleged position as the 'queen of gay studies'" and "searching for credibility and acceptance among the people she writes about but of whom she is not one." Laura Cottingham, review of *Tendencies*, *Out*, January 1994, p. 50.

³⁷Sedgwick, preface, *Between Men: English Literature and Male Homosocial Desire*, 2nd ed. (New York: Columbia University Press, 1992), p. viii.

³⁸Sedgwick, *Epistemology of the Closet* (Berkeley and Los Angeles: University of California Press, 1990).

³⁹"The term *queer* is notably absent in Sedgwick's...book *Epistemology of the Closet*." Dean, p. 116; emphasis in the original.

⁴⁰Don Romesburg and Jennifer Finlay, "The Events that Shaped the Under 30 Mind," *The Advocate: The National Gay and Lesbian Newsmagazine*, Issue 739/740, August 19, 1997, p. 12.

the essays in *Tendencies*: one is her association with AIDS and identification with those who have AIDS, and the other is her own illness with breast cancer.

In her book on popular perceptions of immunity, Emily Martin describes her role as anthropologist and how it disallows ever really being inside or outside a group. She writes, “[a]s is usually the case for anthropologists, moving among such places [as ACT UP and the laboratories where AIDS drugs are tested] was complex; I was never simply inside or simply outside any one group.”⁴¹ Queer, as I have written, is inclusive. It is not, of course, universally inclusive, but it leaves out fewer people than the designations lesbian and gay. And AIDS broadens even the parameters of queer:

Because sexual behavior is clearly not the determining factor in finalizing a self-nomination, even for conventional gays and lesbians, queerness contains the knowledge that social identities...are always accompanied by some sort of public signification in the form of specific enactments, embodiments, or speech acts which are nonsexual or, in the very least, extrasexual.⁴²

As Cindy Patton notes, “AIDS has such power as a supposedly ‘gay disease’ that *anyone* who gets it becomes ‘queer’ by association”⁴³ But it is also anyone who is *associated* with AIDS, either by practicing safe sex, as Patton goes on to note, or by fighting it through activism, who becomes queer by association. However, an association with AIDS only makes one queer, also, by association (as opposed to through behavior or identity), as though one is separated from queerness by

⁴¹Emily Martin, *Flexible Bodies: Tracking Immunity in American Culture--from the Days of Polio to the Age of AIDS* (Boston: Beacon Press, 1994), p. xv.

⁴²Meyer, p. 4.

⁴³Cindy Patton, “Safer Sex and Lesbians: Becoming Queer: Cindy Patton Talks to Simon Watney,” *The Pink Paper*, no. 14, February 25, 1988, quoted in Watney, “Psychoanalysis, Sexuality and AIDS,” in Simon Shepherd and Mike Wallis, eds., *Coming On Strong: Gay Politics and Culture* (London: Unwin, Hyman, 1989), p. 34; emphasis in the original.

glass--never quite inside or outside, but like Martin's anthropologist, able to peer in, existing at the same time inside and outside, but still at a distance.

In Sedgwick's essay "White Glasses," in which the locus of her identification with her friend Michael Lynch, who is ill with AIDS, is a pair of white glasses identical to those Michael wears, the glasses do indeed both allow Sedgwick into the community (the identity) of gay men, but at the same time keep her at a distance.

Sedgwick writes that

my own most formative influence from a quite early age has been a viscerally intense, highly speculative (not to say inventive) cross-identification with gay men and gay male cultures as I inferred, imagined, and later came to know them.⁴⁴

While she may not be able to be a gay man, she can be queer, precisely, I suggest, through her identification and association with Michael's illness. On this she comments that

[i]t wouldn't have required quite so overdetermined a trajectory...for almost any forty year old facing a protracted, life-threatening illness in 1991 to realize that the people with whom she had perhaps most in common, and from whom she might well have most to learn, are people living with AIDS, AIDS activists, and others whose lives had been profoundly reorganized by AIDS in the course of the 1980s.⁴⁵

The way that AIDS makes people queer is not just through the acquisition of disease (though that at least) but also through a strong involvement and association with the affiliations of AIDS.

Glass, or glasses, as barriers provide a way of being both outside and inside. There is mutual "seeing" but not proximity. In other words, one can be outside something and also be part of it. In "White Glasses" Sedgwick describes "peering in the window" ("of every optician in New York, northern California, and

⁴⁴Sedgwick, "Queer and Now," p. 14.

⁴⁵Sedgwick, "Queer and Now," p. 14.

Massachusetts”) to find white glasses “that I thought looked like Michael’s” (p. 254). This is her position vis-à-vis gay men and HIV: she can see it all very clearly, even identify with it, but the separation is sharp and she can peer in only from the outside. It is parallel, of course, with the actual glasses: like magic glasses she can see through them what she wants; they are “gay” glasses: through them everything, herself included, is male and gay.

One of the things that Sedgwick comes to recognize in Lynch and identify with, in a way that can be characterized as uncanny, is his illness. She is not ill when they meet, but she becomes ill, and ill with, as it were, the “counterpart” to AIDS: breast cancer. Sedgwick refers to her illness in quotation marks as a woman’s illness. AIDS in the West is considered a man’s illness (mostly, but not exclusively, a gay man’s illness). They are mirror images of each other: mirror in the sense that they are opposite but matched, and mirror in the sense that they reflect and are the same. When she meets Lynch she confronts (meets) the uncanny: something strange and familiar. Sick and yet well. Herself but a man, a gay man. A mirror never, after all, reflects exactly. Sedgwick identifies as a gay man and also is surprised that anyone can tell her and Michael apart; Lynch, in his essay, writes as though he were Sedgwick.

“Now, shock and mourning gaze in both directions through the obituary frame” (p. 256), Sedgwick writes. The window that she peered through to find the glasses “is now translucent, it allows for gazes looking back and forth in both directions: no longer is she an outsider peering in. It is not only gay male identification however that becomes the common identity between them, but illness: the glasses do not make her like Michael (“I know I don’t ‘look much like’ Michael

Lynch, even in my white glasses” (p. 256), she writes, understanding that “the white of the glasses means differently for a woman, for a man,” p. 255), but there are strong points of commonality in their illnesses: she recognizes that “the same calculus” of dealing with illness might someday “operate around my own fatigue, discouragement, pain, flares of zest and creativity” (p. 266). At the point of meeting Michael, Sedgwick was prepared to enter “the scene of gay men’s bonding, community, thought, and politics, a potent and numinous scene which at the experiential level was at that time almost totally unknown to me” (p. 254), but what she eventually “needed so unexpectedly to learn from Michael” was “about how to be sick--how to occupy...the sick role, the identity of the ‘person living with life-threatening disease’” (p. 261). What allows Sedgwick to identify as a gay man in this essay, I am saying, is her identification with Michael through his illness (by way of his white glasses). Additionally, it is illness that accounts for their mutual identification, for when Lynch pens his essay in Sedgwick’s voice, it is ostensibly his fatigue that prevents him from attending the conference and presenting himself: “Michael Lynch chose to skip the MLA this year,” begins the essay, “having discovered that he is defatigable” (Lynch, p. 79). “If what is at work here,” Sedgwick avers, “is an identification that falls across gender, it falls no less across sexualities, across ‘perversions.’ And,” she adds, “across the ontological crack between the living and the dead” (p. 257). Illness is what lies in this crack--the commonly perceived transition between living and dying⁴⁶--and it is illness that, in part, makes her queer.

⁴⁶Lynch himself comments on the common perception of illness, particularly HIV disease, as marking “imminent morbidity.” Michael Lynch, “Last Onsets: Teaching with AIDS,” *Profession*, 1990, p. 34.

Authorship

The writers under consideration here are public figures not only writing a new book, and not only expressing their grief over a lost loved one, but also re-creating and refashioning their public identities. Of course all literature does this to some extent: it creates the identity of the author, as well as of the reader. But these texts, lying at a certain moment in the history of sexual identification and AIDS discourse, are refashioning their own identities and that of the discourse of gay identity itself. It is significant, for example, that the form of *Sketches from Memory* is a departure for Edmund White, a pioneer of realist gay literature. White comments on the adjustment required for him to adapt to this unusual form: “[Hubert] always wanted us to work on a book together, but I’ve never liked collaborations. Nor did I think I could find a tone that would go with his drawings” (p. 3). The vignettes that follow are anecdotal narratives of their life together, representing the time of Sorin’s illness, hardly referring to his illness (though sometimes, it seems, it leaks through, as though it can’t help it), while the introduction is a memorial, written by White within hours of Sorin’s death. Eve Sedgwick’s essay “White Glasses,” presented at an academic conference, and written as an obituary for her friend Michael Lynch, is a hybrid of genres: academic paper and presentation, memorial and obituary, an encomium and tribute to one who is alive and warrants commendation (“an act of homage to a living friend” p. 254). Michael Lynch’s essay, “Terrors of Resurrection,” transgresses the simple, and normally stable, boundary of authorship. It is indeed a paper that Lynch authored, but not only did he write it with the intention that it be presented by Eve Sedgwick at an MLA convention (the Modern Languages Association’s annual gathering) in his absence, it is written in her voice, adopting her “style,” and attributed

to her as well, in quotation marks.⁴⁷ Carole Maso's novel, *The Art Lover*, begins, indeed, as a novel, which is then revealed to be a novel within the larger novel we are reading. Commentary on the book has cited this earlier narrative as the novel that the character, Caroline, in the larger novel, is writing.⁴⁸ This embedding however is not necessarily clear, and the overlap and borrowing among the layers of narrative, of which there are at least two more, is so extensive that it is hard to say who is writing what, or who is the ultimate author. For example, the character Caroline reflects on her friend Steven and how when they were school children he would draw pictures for her. Then, in the novel-within-the-novel, Candace refers to *her* friend Steven, who drew pictures for her when they were children (p. 25). In another parallel narrative, Henry, Candace's father, returns to their apartment on West Eleventh Street, precisely where Caroline is staying and going through the belongings of her recently dead father, Max. The bowl of water on the floor in Max's kitchen appears on the floor of Henry's kitchen. Both Max and Henry are on the faculty at New York University, one as an art historian, the other presumably in the music department, as he is a composer. The novel borrows images from the world outside of the novel, including in its pages reproductions of paintings, scraps of text torn out of art history books, advertisements from New York City signposts, newspaper clippings, and then seems very poignantly to break for a chapter near the end of the book into stark nonfiction: from a fictional story of a woman dealing with a close friend who is dying of AIDS, to detailing what seems to be Maso's own experience with her friend who is dying of AIDS, switching

⁴⁷The essay's title is "Terrors of Resurrection, 'By Eve Kosofsky Sedgwick.'"

⁴⁸For example, see the Annotated Bibliography in Judith Laurence Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* (Chicago: University of Illinois Press, 1993); also, William Ferguson, "Nowhere to Hide," *New York Times Book Review*, June 24, 1990, p. 20.

details to make the “actual” writing take its place among nonfiction writing, even while embedded in a novel and without disrupting the novel’s storyline.

The gay AIDS fiction discussed in Chapter 2 assumed the grounding of the author (and also the narrator) as an unambiguous subject. The queer texts, while ostensibly autobiographical and significantly less invested in fiction as the primary means for conveying a story or events, do not assume anything so simple as a definable subject who can be named as the author. The crossing and mixing of genres can make even a reliable narrator suspect when she is at once fictional and then appears to be suddenly nonfictional, or suddenly “herself,” as in Maso’s novel. The queer texts then can be said to be self-consciously performative. They recognize the masquerade of self-presentation, of almost any kind of presentation--whether writing or moving about through one’s day. Michael Lynch’s essay is self-consciously performative in that he is addressing it in another’s voice and under the guise of another’s authorship. White and Sorin’s book of sketches denies the demise of Sorin by depicting him throughout as robust and vital. Further, Hervé Guibert’s and Edmund White’s books, as well as Carole Maso’s novel, have more of the character of journal entries made available to a reading public, so quotidian and personal are many of the offered accounts. Guibert’s book is divided into 100 “entries,” as might structure a journal or diary; White describes his shopping itinerary, the daily goings on of his Paris neighborhood; and Maso, by including swatches of “public notices” (a handwritten sign announcing a lost dove, clippings from *The New York Times*, a card handed to her on the street depicting the finger positions of the sign-language alphabet) chronicles the everyday aura of downtown New York City. Yet these

personal accounts are here published, meant to be sold and marketed as literature, as pieces that anticipate and expect an audience.

One of the significant ways in which these texts signal their recognition of self-conscious performativity is the ways they are aware of themselves as literature that is in the process of being created, the way they call attention, in other words, to the writing of the text. In her essay “White Glasses,” for example, Eve Sedgwick refers twice to the time she “decided to write ‘White Glasses’ four months ago” (p. 255). She refers to “the speaking of it” (p. 254) and “the thinking and writing for it” (p. 254). She discusses the essay with Michael, the very subject of the essay: “A week ago at a country inn on Lake Huron, Michael and another friend and I were talking about White Glasses” (p. 266). Carole Maso’s narrator, in the section where the narrator is called Carole Maso, decries, in the second person, invoking her friend, the artist Gary Falk, to whom the book is dedicated and with whom the author is depicted in an author photograph at the end of the book, “Nothing makes it stop, Gary. Nothing. Not the writing of this. Not the writing of *The Art Lover*” (p. 206). In the second chapter of Hervé Guibert’s novel *To the Friend Who Did Not Save My Life*, the narrator, also called Hervé Guibert refers to his approach to writing the book: “On this twenty-sixth day of December, 1988,” he remarks that, “I begin this book, in Rome” (p. 2). And Edmund White remarks in the introduction to his collection of “sketches,” created with Hubert Sorin, “I’m writing this page” with Hubert’s pen, he asserts, because “I couldn’t find anything else to write with” (p. 2).

This self-consciousness about writing is a violation of the normative boundaries of literature. This is also why the hybridity in genre was interesting, but here each of the queer AIDS texts is not just hybrid but aware of itself as written

expression. Another reason the self-consciousness of the texts is interesting is that a self-consciousness about production can be read here as an investment in performance. To embed within the text an awareness of self and of writing is to be aware of the writing as a product for public consumption, and to put oneself within that product. To place oneself knowingly (and autobiographically, to some extent) in the public eye, is to perform, or to be self-conscious about performance. In this way “performativity...enable[s] a powerful appreciation of the ways that identities are constructed iteratively through complex citational processes.”⁴⁹ Performativity is in large part what makes these texts queer and what signals their departure from the realist gay texts. These works herald a reconstruction of the AIDS and gay communities that partially define themselves by the literature they produce and consume. That the queer AIDS texts are such departures from the more familiar realist structures of the gay AIDS fiction indicates a change in the identity of a community that has been necessarily restructured by the illnesses and deaths brought about by AIDS.

Textual Hybridity and Viral Infection

One way to explain the borderline nature of the hybrid texts (that they combine genres and emphasize the borders between genres) is to understand the ways in which they are a response to and a re-enactment of the narratives of viral infection that have come to have such predominance in the popular understanding of HIV and AIDS. The texts want to be both inside and outside, to have some control in a situation in which what is outside--infection--has not only come inside but has made itself part of the body,

⁴⁹Andrew Parker and Eve Kosofsky Sedgwick, “Performativity and Performance,” Introduction to Andrew Parker and Eve Kosofsky Sedgwick, eds., *Performativity and Performance* (New York and London: Routledge, 1995), p. 2.

and not only *part* of the body but part of the genetic structure of the body, the base programming, the DNA. Because HIV is a retrovirus, it does not just overwhelm the immune system, as do other serious diseases, but programs its own viral code onto the immune system's code, so that the body effectively can no longer distinguish between self and not self:

HIV attacks and infects the very cells of the immune system that exist to fight infection....After HIV has attached itself to the CD4 receptor [a type of cell in the immune system], it injects its core into the cell. This allows the viral RNA and enzymes to mingle with the contents of the human cell. Then...viral RNA is converted into viral DNA. Once HIV has inserted its genetic message, it is there for the lifetime of the cell and can be eliminated only if the cell is killed.⁵⁰

Though HIV remains a foreign substance, it also becomes part of the code for what the body is, the genetic mapping of the body. The virus, like the hybrid texts, does not maintain or exist within only one definition or genre at a time. For HIV to be able to program its cellular structure onto those of the body, it must be able to detect, in order to be able to obscure, what is itself and what is not. This is the particular devastation of AIDS illnesses: how the self and non-self are obscured.

The ways that AIDS is inscribed on the skin can also be said to embody the narrative of the illness: from the story of the skin's inscriptions one can read the trajectory--the development or progress: that is, the story--of the illness. A syndrome of possible symptoms, AIDS does not have a consistent or reliable pathology from person to person. One must read from the body's markings, or symptoms, the course of the illness. The illness is a transcription to be read, to be interpreted: "On a neck a purplish lesion shaped like a fish. On a hand a purplish lesion shaped like a heart. A purplish lesion shaped like a star" (Maso, p. 144). The very virus that has penetrated

⁵⁰Edward King, Peter Scott, and Peter Aggleton, "HIV and AIDS," in Peter Aggleton, Kim Rivers, Ian Warwick, and Geoff Whitty, eds., *Learning About AIDS: Scientific and Social Issues*, 2nd ed. (London: Churchill Livingstone, 1994), pp. 21-23.

the border from outside to inside now emerges outside again. The illness, as it were, crosses the boundaries of the body and transforms one's recognizable identity. The marked body not only allows self-revelation, but is the embodiment of the story itself, is the inside that turns itself out for exposure. Guibert writes that "AIDS will have been my paradigm in my project of self-revelation and the expression of the inexpressible" (p. 228). Like narrative, the skin is the site of the exposure of the inside (the private) to the outside (public):

skin is the literal and metaphorical borderland between the materiality of the autobiographical 'I' and the contextual surround of the world. It functions simultaneously as a personal and political, psychological and ideological boundary of meaning, a contested border of restraint and of transgression through which subjectivity emerges.⁵¹

In a homology between markings on the skin and the written word on the page, the two inscriptions are, respectively, the agents of the story and are themselves the text of the story. The markings on the body of the individual with AIDS constitute the prototypical AIDS text: they trace the development of an identity transformed by illness.

When the immune system fails and the body is betrayed as porous--not strictly defined and safely known--then literature, specifically AIDS literature, can be seen to be put forth as a bid for immunity, the possibility of anodyne, if not cure. To hover at the border of genres can be read as an attempt to have, first of all, some sense of where that border is and also to have some control over what and who goes in and out (transgresses the border).

But much of the literature, like the virus, and like paradigms of the virus and infection, cannot stay within borders either. The literature is as ineffectual as are the

⁵¹Sidonie Smith, *Subjectivity, Identity, and the Body: Women's Autobiographical Practices in the Twentieth Century* (Bloomington and Indianapolis: Indiana University Press, 1993), p. 127.

individuals (and their efforts) who try to stem the sickness, suffering, and death.

Throughout the book *To the Friend Who Did Not Save My Life* Guibert is counting on an experimental vaccine to cure him; his friend Bill comes back from the United

States with reports of

an effective vaccine against AIDS, well not really a vaccine, since in principle a vaccine is a preventive, so let's call it a curative vaccine, obtained from the HIV virus and given to patients who are seropositive but don't display any symptoms of the disease...to block the virus and keep it from beginning its destructive process (p. 156).

The nature of a vaccine is to remind the body of what should be inside and outside, or what is self and not self: "Vaccination is a crude imitation of this natural negotiation process between agent and hosts."⁵² A vaccine exposes the body to a small element of the infectious substance and rallies the body's defenses so it can recognize and then expel or defeat any other version of this threatening non-self substance. Guibert declares, near the end of the novel, when he despairs of ever getting the promised vaccine:

I still hope, although at the same time I couldn't care less, to be injected with the Mockney vaccine that will save me from the HIV virus (or even with its dummy, with the fake vaccine, the way I'd like to get a shot anywhere and anytime and from anyone at all, as in my dreams, to be injected with rainwater or any old rubbish, which I'd take with conviction or skepticism for Mockney's saving vaccine, even if it meant getting inoculated at the same time with hydrophobia, bubonic plague, and leprosy by someone with absolutely filthy hands) (p. 198).

Guibert believes that if he can re-establish the boundary of his body--reinstate a clear border between what is inside and outside through the catalyst of a vaccine--he can be cured, regardless even, at this point, of what the substance of the vaccine is.

The writing itself similarly means to re-establish this boundary. It is, for one, supposed to remind the narrator who has died and who hasn't (or who is ill and who

⁵²Cindy Patton, *Sex and Germs: The Politics of AIDS* (Boston: South End Press, 1985), p. 53.

isn't), as in, "the other has died, and I haven't." For example, Edmund White writes, "I kept thinking [Hubert would] live on and on. I'd been diagnosed as HIV positive in 1985 and my health had in no way deteriorated" (p. 4). This is the first stage of ambivalent mourning, a stage in which one is genuinely grieved but also relieved. Ambivalence in mourning, along with the initial "loss of the object" and the subsequent "regression of libido into the ego," are, according to Freud's essay on mourning and melancholia, "the three preconditions of melancholia."⁵³ Looking at how the ambivalence in these texts negotiates the boundaries of self is an anticipation of how that ambivalence is also an indication of melancholia, which I will pursue in Chapter 4. This ambivalence is marked in Guibert's book when he confesses, upon being informed of a former lover's negative HIV test result, "I smiled, I was--isn't it sleazy of me to make this clear?--profoundly and sincerely relieved" (p. 150). There is a need and also a reluctance to reinforce this boundary between self and other, the still alive self and the ill or dying or dead other.

The strongest indication for Guibert in this novel that he has established a border between inside and outside and public and private is that of the secret, whether or not to reveal knowledge. Though he wants control over the concealment and revelation of secrets, he is often ambivalent about divulging them. Taking in knowledge indiscriminately, for example, disgusts him: "I knew that despite his intelligence, Bill is an extraordinarily credulous spectator, someone who can be made to swallow almost anything, but for the moment that naiveté revolted me" (p. 165). And as soon as he asks Bill whether he can keep a secret, "Everything came out, as though I couldn't help it, even though I'd been determined to keep silent" (p. 166).

⁵³Sigmund Freud, "Mourning and Melancholia" (1917) in Angela Richards, ed., James Strachey, trans., *On Metapsychology: The Theory of Psychoanalysis*, The Penguin Freud Library, Vol. 11 (London: Penguin, 1991), p. 267.

Control over a secret provides control over illness time, how long and what it will be like. When he doesn't have control over knowledge, as when receiving the results of a medical test in the post, he feels he is at risk of becoming sicker: "I was sure the results would be bad, and would make me move on to another level of awareness of my illness" (Guibert, p. 175). The information inside the envelope can make his knowledge change and therefore his illness change. His ambivalence over knowledge recognizes that information revealed will take on a power of its own. He meets with his medical doctor, for example, in a public place, to discuss his AIDS treatments:

I'd chosen an out-of-the-way table, even though we'd gotten into the habit of discussing all this in veiled terms, and at that point I couldn't have cared less anymore about keeping everything secret, besides which I'd given my editor a manuscript in which I admitted I was ill, and an item like that, falling into the hands of an editor like him, would race around town--under the seal of secrecy--like wildfire, which I expected, calmly and with a kind of indifference, because it was only natural to betray my secrets, since I'd always done that in all my books, even though this genie could never be stuffed back into its bottle, and I would never again be a part of the human community (p. 185).

Finally, when he is in Rome, accumulating vials of digitaline at the pharmacy in the event that he should want to commit suicide, the pharmacist, believing she has found the drug that will alleviate a fabricated heart condition, yells out in a crowded shop, "I've got your Digitaline!" (p. 225). Here his secret is made public, but still kept secret, a circumstance that sustains two modes of being, straddling the border of known and unknown, public and private.

As shown primarily in Guibert's novel *To the Friend Who Did Not Save My Life*, the texts' characters negotiate the boundaries of the public and the private through a narrative of negotiated secrets and revelations. The difficulty in fortifying such boundaries, as illustrated, for example, by Guibert's fervent attempts to acquire a

vaccine, recapitulates the way the virus violates borders of the body: its cells and the skin. In Guibert's book "the body of the writer becomes identified with the body of the text."⁵⁴ Inside and outside are obscured in the body ill with AIDS and in the hybrid AIDS text. Like the border of the body that is confounded by a virus that is foreign but becomes fundamentally part of the workings of the body, so is the definitional boundary of genre obscured by whether the text functions as fiction or as autobiography.

Autobiography: Lejeune's Pact Violated

The way the queer AIDS literature attempts to subvert the paradigm of HIV infection, and therefore the progression of the illness, is further demonstrated by the confusion in two of these texts between what can be considered fiction and what can be considered nonfiction: Maso's *The Art Lover* and Guibert's *To the Friend Who Did Not Save My Life*. None of the narratives considered here is "pure." The hybrid nature of the texts, the fact that they rely on different genres to produce the whole, mark the texts as impure, or infected. By crossing genre, these writings violate the "law of genre": "At its base, the law of genre stakes its claim through a rhetoric of purity and contamination. Generic criticism thus installed as a border guard defends against the threat of mixed forms."⁵⁵

In the same way we have been led to think of unidirection in acts of sex, so too are the borders of literary genre considered inviolable in particular directions. It is normatively believed that penetration is supposed only to occur in one direction: one

⁵⁴Christopher Robinson, *Scandal in the Ink: Male and Female Homosexuality in Twentieth-Century Literature* (New York and London: Cassell, 1995), p. 135.

⁵⁵Leigh Gilmore, *Autobiographics: A Feminist Theory of Women's Self-Representation* (Ithaca and London: Cornell University Press, 1994), p. 33.

person penetrates and the other is penetrated (even in popular misconceptions about gay male couples, perpetuated in the popular media--think of *La Cage aux Folles*, or its American remake *Birdcage*--one of them is supposed to be “the man”). That penetration can go both ways, back and forth, is decidedly convention-shattering and upsetting. The genres of literature are porous, these texts suggest, that is, penetrable by other genres in a way that is not clear about which is the “standard” or “primary” genre and which subgenre or transgressive genre has penetrated, or violated, the original.

One of the literary genres that is fused here with fiction to form the resulting hybrid is autobiography. The two texts under consideration here--Maso's and Guibert's--are novels. However, they are also detectably autobiographical. Novels are generally understood to be fictional, though not always uninfluenced by personal experience, as is suggested by Edmund White when he refers to his trilogy of novels, starting with *A Boy's Own Story* (1982), followed by *The Beautiful Room Is Empty* (1988), and concluding with *The Farewell Symphony* (1997), as “autobiographical fiction.” In an age that does not accept the self as unitary, there is no such thing, these writers seem to recognize, as autobiography unfettered by fiction, and so they tell their stories, riven with real-life events and fictions that effectively tell the story they wish to forward as representative of their lives or deep feelings, with the transgressive structures that best approximate the stories they want to tell. Neither fiction without self-conscious autobiographical influence nor strict autobiography satisfies the need to express a story or create a self that is in turmoil over illness and the violated sanctity of a reliable (unpenetrable) identity.

The classical convention of autobiography is one that can be taken to be “an essentially referential account of the autobiographer’s life, one which represents as truthfully as possible that life on paper, for there is a complete synonymy between the protagonist, the writer, and the person whose name appears on the title page.”⁵⁶

This promised referentiality has been conceptualized by Philippe Lejeune’s “autobiographical pact” in which the autobiographer extends the promise of a pact with the reader that there is complete referentiality between the author and the subject of the narrative:

Lejeune’s pact is a sort of contract or promise made by the author for the benefit of the reader: it attests to the authenticity and veracity of the work. The author pledges (implicitly or explicitly) to the reader that the author, the narrator, and the object narrated *refer* to the same person.⁵⁷

Most of these works are not technically autobiographies insofar as they do not uphold what Philippe Lejeune has instituted as the autobiographical pact. In Sedgwick’s essay she refers to herself, an academic of queer studies, reliably and recognizably, but also refers to herself as a gay man, rendering either herself or sexual categories themselves unreliable. In White and Sorin’s collection of sketches, the text refers to White’s own legacy as a gay author, but the authorship is a dual one and therefore refuses the most basic of autobiographical assumptions: singular self-referentiality. Lynch’s essay profoundly subverts the autobiographical pact, not by writing fiction, but by asserting some other person as the author of his essay. In Lynch’s case the

⁵⁶Liz Stanley, *The Auto/Biographical I: The Theory and Practice of Feminist Auto/Biography* (Manchester and New York: Manchester University Press, 1992), pp. 60-61.

⁵⁷Leah Hewitt, *Autobiographical Tighropes* (Lincoln and London: University of Nebraska Press, 1990), p. 27; emphasis in the original. See, also, Maria Lauret, *Liberating Literature: Feminist Fiction in America* (London and New York: Routledge, 1994), pp. 106-108. Lejeune’s original argument can be found in “Autobiography in the Third Person,” *New Literary History* (1977), Vol. 9, no. 1, pp. 26-50.

stated author and the narrating persona do indeed refer to the same person, but the narrator he has posited is Eve Kosofsky Sedgwick, someone other than himself, the actual writer of the essay. The pact is here violated in an unusual way in that it is not the textual subject or narrator that is posited as incongruous or unreliable, but the identity (the self-referentiality) of the author. Lynch's essay does not make claims toward autobiography; however, it is a generally accepted convention that the author and the self-referential "I" in an academic essay can unquestionably be taken to refer to the same individual.

The exposure of the relationship between the authorial self and the textual self, distinguishing them as different personas, illustrates the difference between inside and outside the text and also between the private self and public self. Writing makes distinctions between these constructions more blatant, especially when the author chooses his own name for that of his protagonist. Guibert names his character "Hervé Guibert." He has said,

It's true that I've created myself as a character. But I don't think I know him like the readers know him. The creation has happened somewhere between me and the book.⁵⁸

Maso makes it all the more clear that the naming and identification are at the same time arbitrary and carefully chosen by calling her protagonist a close version of her own name until one chapter when she attaches to the protagonist her very own name.

The "presence of fiction in autobiography...tends to make us uneasy, for we instinctively feel that autobiography is--or ought to be--precisely not-fiction."⁵⁹

However, the literary term "autobiographical novel" is a recognized hybrid genre, a

⁵⁸Quoted in Andréa R. Vaucher, *Muses From Chaos and Ash: AIDS, Artists, and Art* (New York: Grove Press, 1993), p. 41.

⁵⁹John Paul Eakin, *Fictions in Autobiography: Studies in the Art of Self-Invention* (Princeton, NJ: Princeton University Press, 1985), p. 9.

hybrid of fiction and self-reflexive nonfiction: “autobiographical fiction is situated at a boundary and calls attention to its hybrid form by lacking a distinct generic name; autobiographical fiction depends for its coherence on the license of fiction to underwrite the contract of autobiography.”⁶⁰ This is the case in *The Art Lover*, when for one section of the book characters to whom we have been introduced, and whose stories we have been following, including that of the narrator, take on a persona that is detectable as being that much closer to the author’s life than the fiction that has come before, and that resumes after this short section is done. Caroline, who narrates, and speaks throughout the often second-person narration, becomes Carole, and Steven, her dying friend, becomes Gary, the artist credited in the copyright notes with particular paintings reproduced in the novel, and who is named in the caption under the author photograph with Carole Maso at the end of the book. The novel that Caroline/Carole is working on while Steven/Gary is in the hospital, initially referred to as *Delirium*, now is referred to as *Ghost Dance*, the actual title of Maso’s previous published novel. By using her own name and identifiable public accomplishments, like the publication of her first novel, Maso can be understood to be extending the promise of the autobiographical pact. The problem is that in this instance the context calls the reliability of the pact into question; the “promise” is extended in the middle of the novel, rendering the borders around the genres of both fiction and autobiography, if not unreliable, then permeable.

One way that conventional genre becomes tangled here is that these “autobiographical” writings make the private public, but by masking its revelations in fiction, also protect the private and keep it hidden. Though Guibert writes in his novel’s “entries” that he wants to keep his illness private, he has by entry 5 (of 100)

⁶⁰Gilmore, p. 96.

told most of his friends. Later he accounts for having announced his illness in a book published in the course of writing this one.⁶¹ However, he writes that his “chief concern, in this business, is to avoid dying in the spotlight of the parental eye” (p. 8). Dying in the public eye, this suggests, will allow him to avoid a more private gaze, that of his parents.

As I have argued, the designation “queer,” is more broadly inclusive of sexual identities than the designations “gay” and “lesbian.” But the term also obscures identity for the same reason: if you know that someone is queer, for example, you will not necessarily have the specifics of what behaviors or acts constitute their identification as queer. Similarly, autobiography that refuses to extend the promise of authenticity manages both to expose the private but also to maintain privacy as no reader can ascertain the specifics of which events constitute the identification of the writing as “true” or “real.”

As personal and journal-like as this writing appears to be, for example, Guibert refers to his private diaries as writing decidedly separate from these public (published) revelations. This is the public side of self-definition, while the diary is private. However, on one occasion, when he is destitute, Guibert describes typing up his diaries and bringing them as they are to his publisher hoping for an advance:

I decided to type up my entire diary, which then consisted of three notebooks filled with my wrenching misfortunes, and then take it to the editor who'd already published five of my books, and negotiate a price for it (p. 76).

There is a close relationship for him between what is public and private writing, but also a strong distinction. Guilty and ambivalent about his diary writing, especially when he is recording the death--and his own reactions to the death--of his close friend

⁶¹Hervé Guibert, *The Man In the Red Hat*, James Kirkup, trans. (London: Quartet Books, 1993; originally published in French as *L'homme au chapeau rouge* in 1992).

Muzil, an activity that “relieved and disgusted me” (p. 87), he has a revelation about why he writes:

And then I sensed--it's extraordinary--a kind of vision, or vertigo, that gave me complete authority, putting me in charge of these ignoble transcripts and legitimizing them by revealing to me (so it was what's called a premonition, a powerful presentiment) that I was completely entitled to do this since it wasn't so much my friend's last agony I was describing as it was my own, which was waiting for me and would be just like this (p. 91).

He gives himself permission to write what is private, failing to distinguish what is private to someone else (Muzil) and what is private to himself. There is a need here, as in Maso's novel, to justify the use of writing, and to invest it with power that one fears it might not have. Guibert was afraid it would damage Muzil, his feelings and his reputation after death: making writing public, he believes, can damage his dead friend, while it can't even keep himself alive. The books are filled with this ambivalence about the power of writing: it can on one hand hasten illness and on the other it has no effect over illness at all.

Because the borders of genre are so unreliable and permeable in these texts, it is tempting to make the reading of the hybrid texts partly into an investigation: how much of the text is true, what can be counted as autobiography? How are the texts referred to in the criticism of the texts, and how are they listed in bibliographies? It is tempting, I propose, because one counts on the past, at least, to be reliable. In reading one relies on indications of what to expect based on the text one is reading and on a presumed referentiality to other texts that are identifiably like the one being read (others of the same genre, for example). If the indicative touchstones of what one might expect are themselves unreliable, then the act of reading--and our identity as readers--is rendered unstable. Of the books discussed here, Hervé Guibert's *To the*

Friend Who Did Not Save My Life offers the most obvious trouble. In his novel, “Guibert inspires questions on every page about what is autobiographical and what’s invented.”⁶² The book has been referred to as a novel, sometimes as a *roman à clef*, and often as an autobiographical novel. Yet, for all that it is extended to a reading public as fictional, it is perceived to be sufficiently nonfictional to be relied upon as a source for a biography. In James Miller’s biography of Michel Foucault--the character “Muzil” in *To the Friend Who Did Not Save My Life*--Miller uses this “novel” by Guibert to substantiate accounts of Foucault’s deathbed words and behavior.⁶³ Others have confirmed the “accuracy” of Guibert’s rendition of events in this novel:

Didier Eribon has said to me that the novel is, so far he can determine, truthful--an accurate account of what actually happened to Foucault in his final months. This is the impression, as well, of Edmund White. Even Daniel Defert, who (as the character Stephane) is portrayed very uncharitably in the novel, volunteered that despite many (mostly unspecified) factual errors...the novel’s interpretations are not so bad.⁶⁴

Although none of the names but Guibert’s are faithful to the individuals they “represent,” making the narrative, with many exceptions, very much like a novel,

⁶²Indiana, p. 194.

⁶³James Miller, *The Passion of Michel Foucault* (New York and London: Anchor Books/Doubleday, 1993). Miller refers to the book as a *roman à clef* and as an autobiographical novel, pp. 28, 354, and 370. It is referred to as an autobiographical novel in Rob Baker, *The Art of AIDS: From Stigma to Conscience* (New York: Continuum, 1994), pp. 47 and 239. In the bibliography it is listed under Fiction in Emmanuel S. Nelson, ed., *AIDS: The Literary Response* (New York: Twayne Publishers, 1992), p. 220, though Guibert’s subsequent book, very similar in style, form, and voice to *A l’ami qui ne m’a pas sauvé la vie*, called, *Le protocole Compassionnel*, is listed under Memoirs/Testaments. In the bibliography of Judith Laurence Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* (Chicago: University of Illinois Press, 1993), p. 250, it is regarded as a journal. In Franklin Brooks and Timothy F. Murphy, “Annotated Bibliography of AIDS Literature, 1982-91,” in Timothy F. Murphy and Suzanne Poirier, eds., *Writing AIDS: Gay Literature, Language, and Analysis* (New York: Columbia University Press, 1993), p. 332, it is listed under Biography and Autobiography, but described as fictive.

⁶⁴Miller, p. 463.

Guibert himself has distinguished the self who writes from the self who is devised by one's own pen:

In an interview with *Libération* (March 1, 1990), Guibert insisted that *A l'ami qui ne m'a pas sauvé la vie* is, after all, a novel. His characters, even the character "Hervé Guibert," are not "completely what they are in reality."⁶⁵

That we cannot always tell fictional self-representation (what Maria Lauret has called "fictions of subjectivity"⁶⁶) from autobiographical self-representation is a manifestation of the extent to which genre has been blurred in the case of AIDS writing--that is, the extent to which it has been made impure or infected. In queer AIDS writing the self is a fiction that can be written. While one is tempted to authenticate the novels for what in them is real or true, correspondence theories of autobiographical identity (one-to-one referentiality between author and protagonist) do not take into account the ways in "which 'self' and 'self-image' might not coincide, can never coincide in language."⁶⁷

Narrative Logic

In classical realist narrative the time sequence as well as the sequence of events are coherent, to the narrator, the characters, and to the reader. Knowing where one is in time--in a "story"--stabilizes identity: one knows where one is, what already has happened, and in some sense what is going to happen, or what can be expected. In postmodern fiction, and particularly in postmodern, or queer, AIDS literature,

⁶⁵David Wetsel, "The Best of Times, the Worst of Times: The Emerging Literature of AIDS in France," in Nelson, p. 98.

⁶⁶Lauret, p. 97.

⁶⁷Shari Benstock, "Authorizing the Autobiographical," in Shari Benstock, ed., *The Private Self: Theory and Practice of Women's Autobiographical Writings* (London: Routledge, 1988), p. 15.

narrative time is disrupted, and this disruption in time and narrative knowledge also disrupts identity.

As argued in Chapter 2, narrative can serve as a mechanism to make life orderly. Illness disrupts life and makes time go out of synch. AIDS, which strikes in episodes, is particularly disruptive of the conventional conception of the progression of illness unto death; AIDS disrupts the normal progression of time but also what is conceived as normal illness time. The AIDS narratives considered here, in different ways, also try to render some sort of order out of the substantial disruptions wrought by HIV infection and AIDS, but one that more often mirrors rather than tries to subvert the unpredictable course that AIDS illnesses take. Narrative, writes Peter Brooks, “is one of the large categories or systems of understanding that we use in our negotiations with reality.”⁶⁸ Though narrative can give events meaning and value, make them comprehensible, and “protect us from chaos,”⁶⁹ narrative here is employed to make sense of, and to interrogate, disruption rather than to “repair” it.

The queer AIDS literature under consideration here does not fit the pattern of conventional realist narrative. It is the variations in temporal sequence that most outwardly mark queer AIDS literature as unconventional, in contrast to traditional realist narratives, particularly the gay AIDS novels discussed in Chapter 2, as well as to common narratives of illness. Time is a convention of narrative, referred to as “narrative time”; while the sequences of a story might not go in order, there is generally some reliable progression to follow. Queer AIDS writing disrupts conventional narrative time in a structural logic I would like to call “illness time.”

⁶⁸Peter Brooks, *Reading for the Plot: Design and Intention in Narrative* (Cambridge, MA and London: Harvard University Press, 1984), p. xi.

⁶⁹Bill Burford, “The Seductions of Storytelling,” *The New Yorker*, June 24 and July 1, 1996, p. 12.

Illness time is a mechanism of some AIDS narratives that changes the course of the conventional progression of narrative logic, believed to begin, proceed, reach a dramatic climax, and end. Thus, illness time disrupts conventional narrative progression. However, although narrative time and logic are disrupted, there is nonetheless in these texts a pattern, an attempt to replicate an experience of illness through narrative that is not nevertheless realist.

Discrepancies between story-time and discourse-time (which I will explain in more detail shortly) are called anachronies.⁷⁰ While some of the narrative time sequences in the gay AIDS fiction discussed in Chapter 2 were anachronous (Cameron's *The Weekend* and Coe's *Such Times*), in that story-time did not coincide exactly with discourse-time--that is, there was some disruption in narrative order--the narrative was still coherent: the reader was, in other words, able to discern discourse-time from story-time without much effort. While a flashback or memory (analepsis) or flashforward (prolepsis) might have reflected some dissonance in the sense of the order of things for the characters (or readers) of the gay AIDS novels, the anachrony neither reflected nor enacted a disruption of identity. The gay AIDS fiction most conspicuously functioned as a manifestation of mourning, which is itself disruptive of time--it interferes with the flow of daily life--but does not disrupt the ontological sense of what is and what is not or what is possible or likely and what is not. Queer AIDS literature however is immersed in ontological disruption, does not

⁷⁰See Steven Cohan and Linda M. Shires, *Telling Stories: A Theoretical Analysis of Narrative Fiction* (London and New York: Routledge, 1988), p. 84; Shlomith Rimmon-Kenan, *Narrative Fiction: Contemporary Poetics* (London: Routledge, 1983), p. 46; Seymour Chatman, *Story and Discourse: Narrative Structure in Fiction and Film* (Ithaca, NY and London: Cornell University Press, 1978), p. 64; and Robert Stam, Robert Burgoyne, and Sandy Flitterman-Lewis, *New Vocabularies in Film Semiotics: Structuralism, Post-Structuralism and Beyond* (London: Routledge, 1992), p. 118.

allow one to know what is possible, or where one stands. Eve Kosofsky Sedgwick, for example, writes an obituary for a dying friend whom she expects to be dead by the time of the obituary's delivery. His health dramatically improves while she discovers herself to have a life-threatening illness. This not only disrupts narrative, and also genre (for an obituary is precisely a narrative appraisal of, and tribute to, one who has died) but also, in so disrupting expected genres of narrative, disrupts ontological categories: specifically life and death, illness and health.

Not all of the works of queer AIDS literature I have mentioned are trying to tell stories. Sedgwick's essay is meant partly to be an obituary for her friend Michael Lynch: "Four months ago when I decided to write 'White Glasses' for this conference I thought it was going to be an obituary for Michael Lynch" (p. 254). Yet, while an obituary is a recognizable narrative form, Sedgwick's address is at least as much an academic essay, separated into numbered parts, rather unlike an obituary.

Additionally, the essay is an obituary written on behalf of an individual who--at the time of writing the piece, and also at the time of its delivery--is still alive, therefore not fulfilling the narrative function of an obituary and therefore unable to complete the "narrative" of Lynch's life: "The best thing about writing it is that it isn't [an obituary]--it's an act of homage to a living friend--but someday it will be" (p. 254).

Narrative is one of the functions that an obituary fulfills; an obituary confers closure to the events of another's life and therefore confers upon the events--now that they have an ending--a narrative. Narratologist A.J. Greimas "emphasizes the orientation towards a goal, and therefore a sense of closure and wholeness, as a crucial determinant of narrative,"⁷¹ while Brooks writes that the "very possibility of meaning plotted through sequence and through time depends on the anticipated structuring

⁷¹Cited in Stam et al., p. 69.

force of the ending.”⁷² An obituary is a structured ending that endows the random events of a life into a connected series of successive events that can be perceived as a narrative. Sedgwick’s essay begins to but does not fulfill these criteria of narrative.

The essay by Michael Lynch, “Terrors of Resurrection,” is not a narrative either. Also an academic essay, it is imaginative, and transgressive of academic form in many ways, but it is not a narrative, insofar as a narrative functions as the communication of a succession of events.⁷³ Edmund White and Hubert Sorin’s book does not constitute a continuous narrative but is a series of sketches, each section--an extended written anecdote with illustrations--its own story, though all together formulate a work that can be taken as a narrative of their life together in Paris.

Both Hervé Guibert’s novel and Carole Maso’s novel, however, can be taken as narrative fiction. In Guibert’s novel the story is comprised of the events connected with his suspecting he has HIV, the test confirming that he does, making the information public to his friends, experiencing the death of his close friend from the same disease that he has himself, the discovery that another close friend is working on a treatment for AIDS, and the various medical interventions into his condition. In the novel by Carole Maso the primary story is that of a writer who mourns her father’s death, goes through his belongings and remembers experiences and conversations with him, relates her experiences over the past year in an artist colony, and endures the illness and death from AIDS of her best friend. The narrative is based on a patchwork of words and images, and relies on an anachronistic structure.

By referring to Maso’s novel as anachronistic I mean that the order in which the story is told does not relate to the order in which the events actually take place.

⁷²Brooks, p. 93.

⁷³See, for example, Rimmon-Kenan, p. 2, and Chris Baldick, *The Concise Oxford Dictionary of Literary Terms* (Oxford: Oxford University Press, 1990), p. 145.

Although Guibert's narrative includes some memories--or analepses--the narrative trajectory is fairly chronological. This chronology, along with the consecutively numbered sections, one to a hundred, lends itself to reading the text as journal entries. This is accentuated by the confessional and confidential style of the writing. For example, the novel opens as follows: "I had AIDS for three months. More precisely, for three months I believed I was condemned to die of that mortal illness called AIDS" (Guibert, p. 1). This is written as a diary or a private letter. *The Art Lover*, on the other hand, leaps back and forth in time: the narration moves from the time after Max is dead to a time when he is still alive, and from the time Steven and Carole are grown to the time they were schoolchildren. The narratives attempt to enact an experience of illness that does not follow a classical realist narrative trajectory.

There are two aspects to narrative temporality, assigned distinct terms by different theorists of narrative (discussed at greater length in Chapter 2). Discourse-time is linear; it is the order in which the story is related, and the order might dip backwards and forwards in time in reflection or projection. Story-time is the order of the events in the story, even if they are not related in order.⁷⁴ "Text-time," writes Rimmon-Kenan, "is thus inescapably linear, and therefore cannot correspond to the multilinearity of 'real' story-time."⁷⁵ While there is no such thing as "natural" temporal narrative convention there is an *idea* of natural time as we live it: that is, one thing comes after another in a linear fashion. Realist writing most closely conforms to what we perceive as time outside a text, even if it does not unfold in synchronization with it; indeed, to best reflect "real time," realist narrative sometimes must distort narrative time in particular ways. As Todorov has remarked, "the notion

⁷⁴Chatman uses these terms; Rimmon-Kenan uses the terms story-time and text-time, p. 44; Cohan and Shires refer to these aspects as story time and narrational time, p. 84.

⁷⁵Rimmon-Kenan, p. 45.

of story-time involves a convention which identifies it with ideal chronological order, or what is sometimes called ‘natural chronology.’”⁷⁶ The way narrative time accords with perceived natural time or does not is what I will examine here, along with what permutations exist with respect to queer AIDS literature. “The differential relation between them can be analysed, as Gérard Genette proposes, in terms of order, frequency, and duration.”⁷⁷ Of these relations, order is the category that exposes disruptions in narrative and “natural” time; while it is nearly impossible even in a realist text to have complete correspondence between the events of the text and the events of the story, the queer AIDS texts exhibit disruption in narrative logic in a way that strains an orderly or progressive reading of the text.

Sedgwick’s essay “White Glasses,” presented at a conference at the CUNY Center for Lesbian and Gay Studies, and reprinted in her book *Tendencies*, is divided into thirteen numbered untitled sections. Similarly, Hervé Guibert’s novel, *To the Friend Who Did Not Save My Life*, is divided into a hundred chapters, or entries. The collection of written and drawn sketches, a collaboration by Edmund White and Hubert Sorin, titled *Sketches from Memory: People and Places in the Heart of Our Paris*, is also separated into numbered episodes, one through sixteen. Carole Maso’s novel, *The Art Lover*, takes place in a particular year and is divided not by numbers but by seasons, beginning with Spring 1985. That these works of literature that focus on or incorporate or stem from an individual’s illness with AIDS are numbered or otherwise ordered in consecutive segments can be taken on one level to be a response to an illness that does not conform to any kind of “natural” order, an illness that is a

⁷⁶Cited in Rimmon-Kenan, p. 16.

⁷⁷Cited in Cohan and Shires, p. 84; also see Chatman, p. 63; Rimmon-Kenan, p. 46; and Stam et al., p. 118.

complete disruption of order. However the order does not hold, and the narrative also reflects the disruption. The chapter in Maso's novel following "Winter" is called "More Winter." "Winter is the longest season here. It goes on and on" (p. 170), writes Caroline to her father Max in the chapter called "Winter," and so it does go on and on when in the following chapter called "More Winter," Caroline becomes Carole and the fictional Steven, dying of AIDS, becomes Maso's friend Gary, who also is dying of AIDS and does die, in a chapter that in myriad ways breaks the normative order of narrative. It does not take place in a separate season, following the pattern set out in the book, but in "more" of the previous season, stretching out the boundaries of time and narrative order.

In queer AIDS literature time is disrupted and distorted by illness, particularly an illness that does indeed disrupt life-time (as opposed to story-time or text-time), not only because illness makes certain events unrealizable, but because AIDS has no stable or constant cycle, no anticipated format, since almost any disease or infection can opportunistically debilitate the infected individual. We do have a conception of the "natural" flow of time--"an ideal 'natural' chronology"⁷⁸--and illness, particularly "chronic, manageable illness," and especially AIDS, disrupts this constructed sense of the natural order of time. While illness is already conceived as a state of uncertainty, having AIDS--even without being ill--compounds that uncertainty. The activist and author Michael Callen has referred to AIDS as "the moment-to-moment management of uncertainty,"⁷⁹ and Guibert writes early in his book, "this book's *raison d'être* lies only along this borderline of uncertainty, so familiar to all sick people everywhere"

⁷⁸Rimmon-Kenan, p. 45.

⁷⁹Michael Callen, "AIDS: The Linguistic Battlefield," in Christopher Ricks and Leonard Michaels, eds., *The State of the Language* (London: Faber and Faber, 1990), p. 171.

(p. 3). Guibert's novel is consumed with matters of knowing and not knowing, certainty and uncertainty. Often it is crucial for Hervé Guibert, the novel's primary character, to know his T-cell count, or whether he has AIDS, or whether he will be admitted into a drug trial, even if these pieces of knowledge or certainty indicate a decline in his health. When he describes the first time he is convinced he has AIDS, he writes, "In an instant, this certainty changed everything, turned everything upside down, even the landscape, and this both paralyzed and liberated me, sapped my strength while at the same time increasing it tenfold" (pp. 30-31). The uncertainty created by illness disrupts conceptions of what is perceived as the normative progression of time, thus calling attention to narrative time as a construction.

Further, in *To the Friend Who Did Not Save My Life*, Guibert can manage to write "posthumously." He knows he will die (or that he is dying) and wants to write all the books of his life right away, the books from his middle period and the mature books of his old age:

when I'd learned I was going to die, I'd suddenly been seized with the desire to write every possible book--all the ones I hadn't written yet, at the risk of writing them badly: a funny, nasty book, then a philosophical one--and to devour these books almost simultaneously in the reduced amount of time available, and to devour time along with them, voraciously, and to write not only the books of my anticipated maturity but also, with the speed of light, the slowly ripened books of my old age (pp. 61-62).

In wanting to write the books of his later life he understands that death is cutting short his development as a writer, that is, the narrative of his writing life. He is robbed, Guibert feels, of his later works. AIDS, by curtailing his writing life, disrupts time (life-time), making his later life come now. Narrative reflects the changes wrought by illness and death, and illness and death subverts (and changes) narrative.

There is no familiar trajectory of narrative order in the queer AIDS texts.

White and Sorin's book most effectively illustrates this in being a somewhat fragmented collection of anecdotes. There is no linearity or apparent order to the short sketches: the first sketch describes a woman singing beneath their window, the next describes shopping for food in the Châtelet district of Paris, the following regards the clothes designer Azzedine Alaïa, and yet the next addresses the concierge of their apartment building. As White's introduction to the book indicates that the ensuing sketches take place during the time that Sorin is dying, one expects that the following narrative will explain or at least lead up to the moment of his death, perhaps serving as a chronicle of his waning weeks and months. White and Sorin's book is, however, held together by an understanding that although all the anecdotes are illustrations of their life together, one story does not necessarily follow another. There is no dramatic build up, no wondering what will happen to any one figure. That the sketches are light and whimsical, disrupts our sense of narrative order, intention, and teleology. The logic of narrative time here is disrupted paradoxically in that one *knows* what will happen; there is no unknowing suspense as we expect there to be in life, where "anything can happen":

"Causes" in the novel are brought into play by the need for some solution or (apparently) antecedent fact which explains and unravels a complicated plot. In this sense causes are really *effects*, since they spring from a given complex of events which creates them, as it were, in pursuit of its own coherence. Effects are likewise transformed into causes by the same curious twist of logic.⁸⁰

That narrative knowledge is subverted--what one can be expected to know and not to know changes places--is an aspect of the queer AIDS literature.

⁸⁰Christopher Norris, *Deconstruction: Theory and Practice* (London: Methuen, 1982), p. 133.

Time itself in the queer AIDS texts can distort and becomes distorted. Guibert writes that after extracting from his old diaries the “chronology that becomes my outline” he discovers that “progression springs from disorder” (p. 51). In *The Art Lover*, illness time is depicted by a counting backwards. When Steven is ill in the hospital, Caroline switches on the television to see the countdown of the launching of the *Challenger*--the first rocket launched by NASA with civilians on board--which will end in disaster. Time is running out, this image suggests, and so are the elements of the body that will maintain, and also that indicate, health. T-cells, for example: “I think of my friend and watch the little numbers on the bottom of the screen go by. T minus twenty-nine seconds and counting” (p. 134). Guibert in his novel also keeps a close watch on T-cells. They are the indication not only of his health but also of his dwindling chances to be given the “cure” to which he believes his friend has access. Once his T-cells drop below a certain level, he is no longer eligible for the experimental trial: “[t]he fatal threshold was 200” (p. 167).

It is as though time actually runs backwards in these texts. Death is the end, but it is also the beginning--the First Cause of the book--even if the death hasn't occurred yet. In White and Sorin's book, for example, the death has happened and is proclaimed at the beginning of the text: “Hubert Sorin, my lover...died just two hours ago in the Polyclinique du Sud in Marrakesh” (p. 1). However even in the texts where no death has yet occurred, as in Guibert's, where it is his own death that is prefigured, death is still the effect and the motivation of the narrative projection: it is both what impels the narrative (and the writing) and what concludes it; in other words, it is what is anticipated at every point. So the stories start with the death and count backwards, as it were, to the circumstances of the illness and the dying that lead to the death.

White starts with the death--the important thing--and then “leads up” to it in the narrative stories, which naturally, along with Sorin’s illustrations, were produced before. Sedgwick’s essay indeed starts with the death, as the essay is an obituary, the death being the narrative propulsion there, even if in this case the death has not yet occurred. Just as I have suggested that it is the obituary that renders a narrative out of a life of disparate events and experiences, so might all narrative include the obituary intention that cements disparate events and anecdotes into a cohesive story. Peter Brooks writes that

All narrative may be in essence obituary in that...the retrospective knowledge that it seeks, the knowledge that comes after, stands on the far side of...death. The further we inquire into the problem of ends, the more it seems to compel a further inquiry into its relation to the human end.⁸¹

The teleological movement toward an end is what determines and allows the details that form the body of a narrative. When the end produces the details that lead up to it you have what is called backwards causality.⁸² The effect can be said to determine the cause, or, more prosaically, knowing the end can allow one to know the causes. Some of the queer AIDS texts, like *Sketches from Memory*, which opens with Sorin’s death, and even “White Glasses,” which projects Michael Lynch’s death, start with the ending, rendering a cohesive narrative out of the most “dysfunctional” of chronologies.⁸³

⁸¹Brooks, p. 95.

⁸²Rimmon-Kenan, p. 18.

⁸³Emily Apter refers to “the dysfunctional chronology in which the narrative sequences are presented” in Guibert’s novel *To the Friend Who Did Not Save My Life*. In Apter, “Fantom Images: Hervé Guibert and the Writing of ‘sida’ in France,” in Murphy and Poirier, p. 85.

Conclusion

While the gay AIDS fiction discussed in the preceding chapter was similarly a response to the disruptive order of the illnesses associated with AIDS, that literature managed to withstand the strain of disrupted order in an effort to stabilize order, identity, and mourning. The queer AIDS literature discussed here, on the other hand, does not react to the strain of disruption in the same way. While the sections or chapters of the literary texts considered here are numbered or ordered in some consecutive manner, the texts themselves do not conform to a larger temporal order. The disruption in the text is sometimes chronological, but sometimes it is also a disruption of genre, as we have seen.

Just as “queer” as a personal identity destabilizes identities that it incorporates and redefines, queer literature destabilizes the categories of literature that it stems from: namely, gay and lesbian literature. Though disrupted time in the texts is not a source of anguish in the queer AIDS texts, in the gay AIDS fiction there was a much more significant anxiety about disrupted time. And just as “queer” destabilizes one’s identities for others, so does queer literature destabilize narrative and identity for the reader.

Additionally, the queer AIDS literature itself functions as obituary: these texts are also mourning the loss, not only of themselves and their loved ones, but of literature. After all, it is literature, because of its inability to be adapted effectively to the crisis of AIDS, that is also thrown for these authors (and their readers) into crisis. So in some sense these texts are themselves obituaries--not lamenting only the loss of loved ones, but lamenting the loss of literature. Queer AIDS literature as it is engaged

in the work of mourning and melancholia will be discussed more thoroughly in the following chapter.

Chapter 4

Queer AIDS Literature: Ontology, Melancholia, Fetishism

In this chapter I will show, using psychoanalytic models, how the queer texts discussed in Chapter 3 are queer in part as a reaction to, and as an enactment of, the melancholia wrought by AIDS. Melancholia is a useful paradigm for investigating the queer texts because it suggests, far more than the mechanisms of mourning, a resistance to separation, a self-consciousness about the formulation of the text, that is, about writing, and also an investment in art and writing as mechanisms that might prevent or protect against loss. The gay AIDS fiction, through the convention of realism for example, acts as though it can work through grief and stabilize identity. The queer AIDS literature, because it accepts a confusion of identities and defies given conventions, is more like (and given to) melancholia, a mechanism that rehearses the state of resisting the working through of mourning. The queer AIDS literature accepts that mourning, this mourning around sexual identity and writing, cannot, and perhaps need not or should not, be worked through.

This resistance to working through mourning is demonstrated in part by the construction of these texts as self-conscious, as dialogic, and as ambivalent about or confused by the hybridity and transgression of ontological identities: that is, a blurring of the normally stable categorical conditions of being alive, ill, or dead, conditions that I call ontological categories, as they are concerned with metaphysical states of being.

The queer AIDS literature, in other words, is hybrid not only generically--as discussed in Chapter 3--but ontologically. Introjection and incorporation, psychoanalytic features of melancholia, serve as useful models to explain the

ontologically hybrid nature of the texts, as will be demonstrated in this chapter. Eve Sedgwick's essay "White Glasses" will serve as a primary model of such ontological hybridity.

Making claims about writing and negotiating its power is a melancholic gesture toward preventing (warding off) loss. This will be explored later primarily in connection to Carole Maso's novel *The Art Lover*. I will look at the text's interrogation of art and writing as a melancholic investment. I will also pursue later in the chapter the idea that the dialogic nature of the texts is a manifestation of the internalized ambivalence that is a component of melancholia. I will here discuss the self-consciousness of the written texts as an introduction into the idea of how the queerness of the texts is also what makes them melancholic.

There are four aspects of writing in the queer AIDS texts that seem to me to be melancholic: incorporation, fetishism, the use of dialogic narrative to represent ambivalence and therefore to preserve the lost other, and the interrogation of writing to create a talisman against loss and death. These constructions are present in the following three texts that I will use as examples: Eve Kosofsky Sedgwick's essay "White Glasses," Edmund White's collaboration with Hubert Sorin, *Sketches from Memory*, and Carole Maso's novel *The Art Lover*. Although I am here examining primarily the same texts I examined in Chapter 3 (though I will not be looking very closely here at Hervé Guibert's novel *To the Friend Who Did Not Save My Life*), because here I am addressing narratorial and authorial positions it will be useful to place the texts among the author's other published works, for many of them are departures.

I have explained, and will pursue further in this chapter, how Sedgwick's essay is transgressive as an academic presentation and also as an obituary. While it is not unfamiliar in tone in respect to Sedgwick's other work, I would like to discuss now where this essay fits within the collection it appears in, *Tendencies*, and how the book *Tendencies* relates to the rest of her writing. "White Glasses" is not the only memorial in the collection. "Memorial for Craig Owens" appears near the center of the book and is meant to remember a man with whom Sedgwick had a "fragmentary and public" relationship.¹ One of the sharpest moments in this memorial is the grief in her recognition of the loss of Owens as her reader. In struggling to write an essay that "turned out to be much harder to think through and to enjoy than I'd expected" (p. 105), Sedgwick finally is able to engage her thought by "the fun of imagining sending it to him if I could ever finish it" (p. 105). If she "just found that the only pleasure of the thing came in invoking Craig's eyes to read it through," she recognizes that "suddenly I couldn't do that" (p. 106).

Most of the essays in *Tendencies* "were concurrent with [Sedgwick's] work on...*Epistemology of the Closet*" (p. xii) and explore the notion that "modern sexual identities are...structured by a double-binding but immensely productive incoherence about gender" (p. xii). As I will discuss further in relation to "White Glasses," this book of essays is marked by Sedgwick's continual recourse to "the first person singular," a grammatical form that she finds "mutilating and disingenuous to disallow" in that it "marks the site of such dense, accessible effects of knowledge, history, revulsion, authority, and pleasure" (p. xiv). Of course it is the appropriate grammatical form for a memorial, but in this book a memorial is never without its

¹ Eve Kosofsky Sedgwick, "Memorial for Craig Owens," *Tendencies* (Durham: Duke University Press, 1993), p. 104; subsequent references will be made parenthetically within the text.

“queer tutelage”--its academic sensibility and intention--which is the title of the broad section under which the “Memorial for Craig Owens” appears.

The essay “White Glasses” comes at the very end of this collection in a section called “Across Gender, Across Sexualities.” The whole book is dedicated “in memory of Michael Lynch” and includes on the dedication page three photographs of the two of them together poised over the grave of Emily Dickinson, each of them sporting a pair of white glasses.

Sketches from Memory is in a very different format and style from the autobiographical fiction Edmund White is known for, even considering his early more abstract novels like *Forgetting Elena*, *Nocturnes for the King of Naples*, and *Caracole* and his more recent biography of Genet (and other “departures,” such as his authoring most of the text for the popular *The Joy of Gay Sex*, published in 1977). In this book, *Sketches from Memory*, simple vignettes by White are accompanied by illustrative drawings by Sorin. The book is made heartrending by the introduction written by White, a week after the book was completed, and just two hours after Sorin’s death from AIDS. Though it has been remarked that “*Sketches from Memory* is not a book about AIDS but about the success with which two people wrest from the disease their sense of purpose and their prematurely fragile memories,”² it seems to me that *Sketches from Memory* is very much about AIDS, about the sort of fabrication of one’s daily life that one might struggle to invent and hold to when it is precisely that quotidian life that is unraveling. The fact that they are sketches “from memory” and not from present life suggests that this is not the way life is lived for them anymore,

² Ryan Prout, “A Book of Laughter and Remembering,” review of *Sketches from Memory*, *The Harvard Gay and Lesbian Review*, Vol. 2, no. 2, Spring 1995, p. 38.

even while the anecdotes are presented as textual incarnations of their current life together.

In this book there is a different tone from his other books (he records trying to find the right tone to accompany Hubert's drawings) even though White's other writing (the writing found in his novels) is also to some extent autobiographical. The writing in *Sketches from Memory* is comprised of anecdotes and sketches, and they are written as vignettes. Also, the writing here is not autobiographical fiction describing his own life but autobiographical life sketches, prompted by Sorin's drawings, and trying to capture the lives of two people, not just himself. The corresponding "sketch" in *The Farewell Symphony*, his representation of Hubert there, as the character "Brice," is very different from what we find here, for there the tone is all lament along with an inability to speak: "I can't go on," White concludes in the novel, when he begins to speak about Brice, "I can't tell this story, neither its happy beginning nor its tragic end."³

The Art Lover is Carole Maso's second novel, written when she was still published by the relatively small North Point Press. She is now published by Dutton, a major publisher, and reviewed regularly in the mainstream press. She has a strong following and incites such estimations as being "one of the very best living novelists."⁴

Ontology

In the way that queer literature, and the designation queer itself, pertains to work that renders borders arbitrary and flexible--borders between identities, especially gender

³ Edmund White, *The Farewell Symphony* (New York: Knopf, 1997), p. 411.

⁴ Molly Hite, "Death Sentences," review of *Defiance*, *The Women's Review of Books*, Vol. XVI, no. 1, October 1998, p. 7.

and sexual identities, and also borders between genres of literary expression--queer AIDS literature attempts to produce, but also attempts to blur, demarcations between illness and health, perceived illness and health, and death and life. When Sedgwick writes, for example, that "in many ways it is full of stimulation and interest...to be ill and writing" (p. 256), there is a suggestion that previously these categories--writing and being ill--were necessarily, for her, separate, and that combining illness and dying with writing is a new enterprise formulated from two previously disparate identities. The experience of having breast cancer for her has "proven just sheerly *interesting* with respect to exactly the issues of gender, sexuality, and identity formation that were already on my docket."⁵ This is not an untypical intellectual response to illness, for consider Jackie Stacey's comment in her book on her experience with cancer that

My interest in writing [this book] stemmed primarily from my experience of having cancer and my overwhelming feeling that what was happening to me was not only horrible and terrifying, but also intellectually intriguing.⁶

Illness can bring together worlds--the cerebral and the somatic--often formerly experienced as disparate.

In Sedgwick's essay a certain way of looking--adopting a certain type of glasses, if you will--while intended to provide clarity in one direction, is transparent in the other direction as well. They provide a way of looking but also a way of being seen. They are, interestingly, both window and frame. The essay is one that throughout negotiates clarity and opacity. Glasses provide clarity (in one direction). An obituary provides clarity (about the person who has died). "Unreflecting," she writes, however,

⁵ Sedgwick, "Queer and Now," *Tendencies*, p. 12; emphasis in the original.

⁶ Jackie Stacey, *Teratologies: A Cultural Study of Cancer* (London and New York: Routledge, 1997), p. 23.

I formed my identity as the prospective writer of this piece around the obituary presumption that my own frame for speaking, the margin of my survival and exemption, was the clearest thing in the world (p. 255).

“In fact,” she concludes, “it was totally opaque” (p. 255).

An “obituary presumption,” according to Sedgwick is not only that the other is dying, but that one is healthy oneself, or at least not dying, not about to die before the subject of the obituary. Frames do not hold in this essay: or, the same frames mean different things for different people, in different situations. The subject of the obituary is alive at the time of its delivery. The author of the obituary becomes seriously ill.

The queer texts are invested in an approach that both preserves and violates the boundaries of their form, not unlike the melancholic body that incorporates part of the lost other but only as if magically, through fantasy. Sedgwick violates the normative form of the obituary, and in some senses the academic address, and Maso violates the formal parameters of the novel by reproducing signs and advertisements from New York’s streets and by changing the character’s personas into identifiable personalities from the extra-novelistic world.

The queer texts, as demonstrated in the previous chapter, are hybrids of genre, assuming one generic form but unable to maintain the inviolability of genre. Similarly, as I would like to show here, the queer texts cannot respect and keep themselves within ontological boundaries, there is a fluidity of ontological borders: those marking life and death; illness and health, primarily. This is partly an extension of queer, as queer does not and cannot respect such boundaries:

In contrast to the gender-based construction of the lesbian in representation, queer theory...works not at the site of gender, but at the site of ontology, to shift the ground of being itself, thus challenging the Platonic parameters of Being--the borders of life and death.⁷

The queer AIDS literature constitutes a writerly manifestation of melancholia, a creative response, if you like, to unbearable or unfathomable loss, including anticipated loss, and including the sense and fear of one's own mortality. "If the corpse figures as the outside of culture, it is not thereby merely an alternative term in a binary," one theorist comments, "for it is of the corpse's recuperation within that binary that the work of mourning is meant to convince us."⁸ The melancholic AIDS literature means to lament the loss of, but also to revive, the lost other.

In an observation especially useful here in examining Sedgwick's essay and the novels of Maso and of Guibert, Brian McHale argues:

Postmodernist writing models or simulates death; it produces simulacra of death through confrontations between worlds, through transgressions of ontological levels or boundaries, or through vacillation between different kinds and degrees of "reality."⁹

Like the category queer, "self-reflective, self-conscious texts, are also, as if inevitably, about death, precisely because they are about ontological differences and the transgression of ontological boundaries."¹⁰ Case has indicated that queer has similar death-invoking propensities: "queer desire punctuates the life/death and generative/destructive bipolarities that enclose the heterosexist notion of being."¹¹

⁷ Sue-Ellen Case, "Tracking the Vampire," in Teresa de Lauretis, ed., *differences*, Vol. 3, no. 2, Summer 1991, p. 3.

⁸ William Haver, *The Body of This Death: Historicity and Sociality in the Time of AIDS* (Stanford, CA: Stanford University Press, 1996), p. 83.

⁹ Brian McHale, *Postmodernist Fiction* (New York and London: Methuen, 1987), p. 232.

¹⁰ McHale, p. 231.

¹¹ Case, p. 4.

In the case of Maso's novel, where it appears that a nonfictional account of Gary Falk's death has interrupted the fictional rendering of the same event, the fictional illusion, as McHale would put it, has been shattered:

the shattering of the fictional illusion leaves the reader 'outside' the fictional consciousness with which he or she has been identifying, forcing the reader to give up this consciousness and, by analogy, to give up her or his own, in a kind of dress-rehearsal for death.¹²

Even while queer AIDS writing is, as I will argue, a talismanic fetish meant to ward off the death of the author, it is at the same time an "experiment with imagining our own deaths, to *rehearse* our own deaths."¹³ (It is interesting in this light that postmodernist fiction, following the death of the author, has posited also the death of the subject.¹⁴ But the subject in postmodernist AIDS fiction is often an extension of the author; often they are called the same name. In AIDS literature, the subject and the author can be easily confused, and often both are dying: "As the line between the dead and the survivors dissolves, so too does the customary elegiac politics of subject and object."¹⁵) The genre borders that intertextual postmodern fiction interrupts are akin to the border between life and death and also the border of the skin, the boundary whose penetrability determines health and illness, sanctity of the self, subjectivity, ego boundaries.

While in the previous chapter I examined the hybrid nature of the genres of the queer AIDS texts, in this chapter I am claiming that there are psychic processes involved in the breaking of boundaries. In the rest of this chapter I will focus on

¹²McHale, p. 231.

¹³McHale, p. 232.

¹⁴See Patricia Waugh, "Postmodernism and Feminism: Where Have All the Women Gone?" *Feminine Fictions: Revisiting the Postmodern* (London and New York: Routledge, 1989), p. 1.

¹⁵Melissa F. Zeiger, *Beyond Consolation: Death, Sexuality, and the Changing Shapes of Elegy* (Ithaca and London: Cornell University Press, 1997), p. 108.

identity and identification rather than on genre and begin by examining how the literature replicates the melancholic mechanism of incorporation.

Melancholia

While mourning and melancholia have the same causes, Freud explains that there are “three preconditions of melancholia--loss of the object, ambivalence, and regression of libido into the ego.”¹⁶ Regression of the libido into the ego Freud here aligns with identification; in melancholia “an object cathexis is *replaced* by an identification.”¹⁷

“In other words,” Schiesari continues,

the object cathexis is not strong enough to resist the shattering of the object relation due to some interfering factor, so that what follows is not the withdrawal of affection from the object and its subsequent placement onto another one, but rather the retention within the ego of the libido now freed from its investment in the once loved object.¹⁸

Freud writes that the libido, rather than settling on another object, “served to establish an *identification* of the ego with the abandoned object.”¹⁹

For my purposes here, the critical aspects of melancholia, from the Freudian perspective, are identification and ambivalence. The latter I will deal with later in the section arguing that the dialogic nature of the queer/melancholic texts is an outward manifestation of internalized ambivalence due to melancholia. The loss of the object in these texts is given but not simple; for example, in “White Glasses” the loss is still only anticipated, and so too in Guibert, where the demise anticipated is the narrator’s own. While mourning “is regularly the reaction to the loss of a loved person,”²⁰ some

¹⁶Freud, “Mourning and Melancholia,” p. 267.

¹⁷Juliana Schiesari, *The Gendering of Melancholia: Feminism, Psychoanalysis, and the Symbolics of Loss in Renaissance Literature* (Ithaca and London: Cornell University Press, 1992), p. 44; emphasis in the original.

¹⁸Schiesari, p. 44.

¹⁹Freud, “Mourning and Melancholia,” p. 258; emphasis in the original.

²⁰Freud, “Mourning and Melancholia,” p. 252.

of the queer texts seem to be involved in mourning a loss that has not yet happened. The “reason the loss in the melancholic is not clear,” Schiesari writes, “is that it is the condition of loss *as* loss that is privileged and not the loss of any particular object.”²¹ The loss in the queer/melancholic texts cannot be so easily pinned down to the loss of a particular person.

I will address identification and ambivalence as the aspects that mark melancholia as the particular conditions that are different from those conditions that are constitutive of mourning.

Melancholia: Introjection and Incorporation

The principal features of melancholia are identification and introjection. Introjection “is closely akin to identification.”²² Identification is defined psychoanalytically as the

[p]sychological process whereby the subject assimilates an aspect, property or attribute of the other and is transformed, wholly or partially, after the model the other provides.²³

While “identification is a preliminary stage of object-choice,”²⁴ in melancholia, identification is the mechanism through which one attempts to work through one’s loss. On this Judith Butler comments that

[t]his identification is not simply momentary or occasional, but becomes a new structure of identity; in effect, the other becomes part of the ego through the permanent internalization of the other’s attributes.²⁵

Butler’s account suggests that in the work of overcoming loss

²¹Schiesari, p. 43; emphasis in the original.

²²J. Laplanche and J.-B. Pontalis, *The Language of Psychoanalysis*, Donald Nicholson Smith, trans. (New York and London: W.W. Norton & Company, 1973; originally published in French in 1967), p. 229.

²³Laplanche and Pontalis, p. 205.

²⁴Freud, “Mourning and Melancholia,” p. 258.

²⁵Judith Butler, *Gender Trouble: Feminism and the Subversion of Identity* (New York and London: Routledge, 1990), p. 58.

[t]he loss of the other whom one desires and loves is overcome through a specific act of identification that seeks to harbor that other within the very structure of the self.²⁶

Introjection is part of the process of identification:

Freud describes how the subject introjects others and, in doing so, identifies with them. The connection between introjection and identification implies that the introjection of others can become a part of the subject's ego, which then takes on the character of these identifications.²⁷

In the work of psychoanalysts Nicolas Abraham and Maria Torok, introjection is qualified as a more elaborate process of identification; it "is the process of psychic nourishment, growth, and assimilation, encompassing our capacity to create through work, play, fantasy, thought, imagination, and language."²⁸ "A preliminary definition might be that it is a constant process of acquisition and assimilation."²⁹

Incorporation, however, is a melancholic response and constitutes an inability to introject normally. Incorporation is the "[p]rocess whereby the subject, more or less on the level of phantasy, has an object penetrate his body and keeps it 'inside' his body."³⁰ Maria Torok explains that "incorporation is invariably distinct from introjection (a gradual process) because it is instantaneous and magical."³¹

The act of "incorporation aspires to accomplish by magic [that which] has meaning only in a figurative sense."³² Introjection "refers to the way the subject in

²⁶Butler, *Gender Trouble*, pp. 57-58.

²⁷Nicola Diamond, in Elizabeth Wright, ed., *Feminism and Psychoanalysis: A Critical Dictionary* (Oxford: Blackwell, 1992), p. 177.

²⁸Nicolas T. Rand, Introduction, Nicolas Abraham and Maria Torok, *The Shell and the Kernel*, Rand, trans. and ed. (Chicago and London: The University of Chicago Press, 1994; originally published in French as *L'ecorce et le noyau* in 1987), p. 14.

²⁹Rand, p. 9.

³⁰Laplanche and Pontalis, p. 211.

³¹Torok, "The Illness of Mourning and the Fantasy of the Exquisite Corpse," in Abraham and Torok, *The Shell and the Kernel*, p. 113.

³²Abraham and Torok, "Introjection--Incorporation: *Mourning or Melancholia*," in Serge Lebovici and Daniel Widlöcher, eds., *Psychoanalysis in France* (New York: International Universities Press, 1980), pp. 4-5.

fantasy ‘takes into itself’ objects from the ‘outside’ world, and, henceforth, preserves them ‘inside’ the self.”³³ “Intro-jection--throwing within,” Abraham and Torok question, “is that not the same as incorporation?” Their response is that “a distinction should be made, just as one would differentiate between a metaphorical image and a photographic image.”³⁴ Though incorporation and introjection are similar mechanisms, and both occur on the level of fantasy, incorporation is a fantasy of *corporeal* integration; in introjection the fantasy is a psychic one. Incorporation carries out bodily, in other words, what in introjection is accomplished metaphorically as a way to pre-empt what introjection must acknowledge as gone. Introjection “is a process that serves the work of mourning,” while “[i]ncorporation, on the other hand, belongs more properly to melancholia.”³⁵ “In fine,” explains Torok, “incorporation is the refusal to introject loss.”³⁶

It must be understood that incorporation, as formulated by Abraham and Torok, is a pathological mechanism, a severely neurotic obstacle to the normal work of introjection. Incorporation “occurs when the process of introjection is blocked by conflictual desires.”³⁷ “The fantasy of incorporation reveals a gap within the psyche; it points to something that is missing just where introjection should have occurred.”³⁸ It is this fantasy that is deemed pathological, a pathological substitute for the normative process of introjection.

³³Diamond, p. 176.

³⁴Abraham and Torok, “Introjection--Incorporation: *Mourning or Melancholia*,” p. 5.

³⁵Butler, *Gender Trouble*, pp. 67-68.

³⁶Abraham and Torok, “Mourning *or* Melancholia: Introjection *versus* Incorporation,” in Abraham and Torok, *The Shell and the Kernel*, p. 127.

³⁷Esther Rashkin, *Family Secrets and the Psychoanalysis of Narrative* (Princeton, NJ: Princeton University Press, 1992), p. 170.

³⁸Abraham and Torok, “Mourning *or* Melancholia,” p. 127.

Similarly, of course, melancholia is also a pathological reaction, a borderline condition, sometimes a psychosis, that prevents one from undertaking the more normal work of mourning. However, with theorists Douglas Crimp and Michael Moon,³⁹ who employ Freud's conception of melancholia while remaining wary of the divisions of normalcy and pathology that such psychoanalytic concepts can invite, especially for lesbians and gay men, I intend here to wrest the mechanisms from their intrapsychic incarnations and utilize the concepts for a cultural analysis of the AIDS texts. I use both melancholia and incorporation as paradigms of a certain inability to work through loss that is the prerequisite of the process of mourning; they are models that provide greater understanding of the work of the queer AIDS literature in contrast to the gay AIDS fiction discussed in previous chapters.

Introjection requires that a loss be understood and acknowledged; it further requires that the loss be, not filled or replaced, but displaced by a figurative substitute as the means to acquire what is literally wanted. It is by introjection, according to this paradigm, that we acquire language: our squalls for food or the mother's breast--our "empty mouth"--are displaced by language, by "learning to fill the void of the mouth with words."⁴⁰ Language "makes up" for the absence of what is desired by "representing presence."⁴¹ Or, as Butler condenses it, "introjection of the loss characteristic of mourning establishes *an empty space*, literalized by the empty mouth which becomes the condition of speech and signification."⁴²

³⁹See Douglas Crimp, "Mourning and Militancy," *October*, Winter 1989, Vol. 51, pp. 3-18 and Michael Moon, "Memorial Rags," in George E. Haggerty and Bonnie Zimmerman, eds., *Professions of Desire: Lesbian and Gay Studies in Literature* (New York: The Modern Language Association of America, 1995).

⁴⁰Abraham and Torok, "Introjection--Incorporation: *Mourning or Melancholia*," p. 6.

⁴¹Abraham and Torok, "Introjection--Incorporation: *Mourning or Melancholia*," p. 6; emphasis in the original.

⁴²Butler, *Gender Trouble*, p. 68; emphasis in the original.

Incorporation becomes necessary when words cannot replace what is missing, when the loss is unspeakable or unnameable. Incorporation, therefore, is anti-metaphorical. While introjection has the place of the mouth, incorporation has no place; it floats, and therefore matches the confusion and deferment of meaning of the cathected object (is it the lost object, is it me, is it something always already gone?) that melancholia renders place-less.

This in part is useful to explain why the queer AIDS texts tend to rely on an autobiographical textual strategy and the gay AIDS texts a fictional one: because incorporation is anti-metaphorical and therefore disallows fiction. Moreover, the restless hybridity of genres in the queer texts--the rupture, for example, from fiction into nonfiction, or the straddling of genres (the wavering between autobiography and fiction explored in Chapter 3)--similarly signals an inability to find a stable literary form for the representation of loss. Introjection, on the other hand, allows metaphor; it allows all sorts of deferral and signifying and naming. "When introjection proves impossible," however, "then, the decisive transition to incorporation is made at the point when the mouth's *words* do not succeed in filling the subject's emptiness, so he fills it instead with an imaginary *thing*."⁴³ In this way incorporation produces a fetish: it wards off the anxiety about what is missing by obscuring the lacuna, the gap; and the way it obscures the loss, the emptiness, is by filling it:

The desperate artifice of filling the mouth with illusory food will have the additional effect--also illusory--of suppressing the idea of a lacuna that needs to be filled with the help of words, the very idea of the need for introjection.⁴⁴

⁴³Abraham and Torok, "Introjection--Incorporation: *Mourning or Melancholia*," pp. 6-7; emphasis in the original.

⁴⁴Abraham and Torok, "Introjection--Incorporation: *Mourning or Melancholia*," p. 7; emphasis in the original.

Abraham and Torok suggest that incorporation takes place in what they term a fantasy crypt that forms within one, instead of the empty mouth of introjection. "The crypt," Derrida comments, "is the vault of a desire."⁴⁵ In the formulation of a crypt "[t]he inaccessible object of desire is...installed or in-corporated as a 'fantasy' within the body and hidden from the Ego."⁴⁶ "What the crypt commemorates, as the incorporated object's 'monument' or 'tomb,' is not the object itself, but its exclusion, the exclusion of a specific desire from the introjection process."⁴⁷ Derrida continues that "cryptic incorporation always marks an effect of impossible or refused mourning."⁴⁸ Because incorporation is a fantasy, the "location" of the crypt, of the incorporation, is vague: "Grief that cannot be expressed builds a *secret vault* within the subject."⁴⁹ Schiesari remarks that not only does Freud's discussion of melancholia "suggest confusion about where to locate the loss, but confusion also seems to alternate between what is external and what is internal to the melancholic subject."⁵⁰ Because incorporation is a fantasy and because the incorporated space is imagined, Butler poses the question that if

the identifications sustained through melancholy are "incorporated," then the question remains: Where is this incorporated space? If it is not literally within the body, perhaps it is *on* the body as its surface signification such that the body must itself be understood *as* an incorporated space.⁵¹

⁴⁵Jacques Derrida, "Fors," Foreword to Nicolas Abraham and Maria Torok, *The Wolf Man's Magic Word: A Cryptonomy*, Nicholas Rand, trans. (Minneapolis: University of Minnesota Press, 1986), p. xvii.

⁴⁶Rashkin, p. 170.

⁴⁷Derrida, p. xvii.

⁴⁸Derrida, p. xxi.

⁴⁹Abraham and Torok, "Introjection--Incorporation: *Mourning or Melancholia*," p. 8; emphasis in the original.

⁵⁰Schiesari, p. 40.

⁵¹Butler, *Gender Trouble*, p. 67; emphasis in the original.

Though the crypt is an important term in the work of Abraham and Torok, it is pertinent to my argument only conceptually as a structural model of how the lost object is sustained in reaction to unresolved grief. The paradigm serves potentially to explain the particular structures of narrative employed to render the melancholia found in the queer AIDS texts.

“White Glasses”

The text that I will examine initially in this chapter is the essay “White Glasses” by Eve Kosofsky Sedgwick. I have already argued in Chapter 3 that while it might seem curious that I am looking at an academic essay among other more conventionally narrative works of literature, it is precisely the ways in which Sedgwick’s essay is an autobiographical narrative and an academic interrogation that makes it instrumental to my analysis here. The main reason that I should like to rely on “White Glasses” in this chapter is that the essay offers so many paradigms for what I am trying to assert here: specifically about melancholia (identification and incorporation), ontology, and fetishism. “White Glasses” will serve also as a prototype from which to examine the other works of queer AIDS literature as exhibiting symptoms of melancholia.

Eve Sedgwick’s essay started out, she says, as an intended obituary for her friend Michael Lynch, to be presented at a conference at the CUNY Center for Lesbian and Gay Studies:

Four months ago when I decided to write “White Glasses” for this conference I thought it was going to be an obituary for Michael Lynch (p. 254).

He was dying when she decided to write the essay, or so she thought: “I thought my friend Michael Lynch was dying and I thought I was healthy” (p. 255). Her frame of

reference for writing his obituary was “survival and exemption,” but “Michael didn’t die; I wasn’t healthy”:

within the space of a couple of weeks, we were dealing with a breathtaking revival of Michael’s energy, alertness, appetite--also with my unexpected diagnosis with a breast cancer already metastasized to several lymph nodes (p. 255).

While the text is transgressive--in the sense that it transgresses genres, by being both academic essay/presentation and obituary--it is further transgressive by being only an anticipatory obituary, a memorial and dedication containing “the things you can’t say to the people you love” (p. 256) now being precisely said to the subject of the memorial.

An obituary performs a function. It announces the fact of a death, its cause and circumstances, and names the survivors of the deceased. Often an obituary will provide some details about the social achievements of the deceased, along with some biographical details. A eulogy is a formal commendation, praise of one who has recently died. A memorial is a monument or piece of writing the function of which is to preserve memory. An AIDS obituary can be said to perform additional functions, for example, simply claiming a death from AIDS when the overwhelming sentiment in a society is to deny the deaths, or it can serve to cement a community that has come partially to be defined by the illnesses and deaths associated with AIDS.

Normally an obituary is written for someone who has died.

The essay is transgressive as an obituary because the subject of the piece is not dead. It is transgressive as an academic presentation because it is set within the frame of an obituary genre, a style generally considered to be more appropriate to a memorial service than to an academic arena. While the essay might be considered transgressive

for being an academic presentation and also throughout strongly autobiographical (at least, self-reflective), this is a style that has become, if not generally accepted, then at least increasingly common:

More and more academics, of late, have been shifting to first-person discourse, integrating personal anecdotes and reminiscences, as well as confessions of idiosyncratic tastes and private pleasures, into their critical writing.⁵²

And while it has been noted that “[t]here seems to be a new respect for the first-person inflection...[t]here also seems to be a backlash against [it], a dismissal of such narrative strategies as overly self-indulgent.”⁵³ This exemplifies why Sedgwick has to defend her literary position here, as she herself explains it in the foreword to

Tendencies:

There’s a lot of first person singular in this book (and some people hate that)...the first person throughout represents neither the sense of a simple, settled congratulatory “I,” on the one hand, nor on the other a fragmented postmodernist postindividual--never mind an unreliable narrator. No, “I” is a heuristic; maybe a powerful one (p. xiv).

As her defense here is that her first-person narration is going to facilitate self-edification in her readers (and perhaps also in herself), this presents another transgression of a sort, since a scholarly collection of essays is thought rather to impart erudition not to be the means by which to seek out knowledge for oneself elsewhere. Finally, it could be said that this obituary is most profoundly transgressive in its awareness and rendering of the obituary as a window, or, a two-way mirror:

“shock and mourning gaze in both directions through the obituary frame” (p. 256).

An obituary is generally thought of as unidirectional: the living can consider and

⁵²Candace Lang, “Autocritique,” in H. Aram Veaser, ed., *Confessions of the Critics* (New York and London: Routledge, 1996), p. 41.

⁵³Emily Apter, *Feminizing the Fetish: Psychoanalysis and Narrative Obsession in Turn-of-the-Century France* (Ithaca and London: Cornell University Press, 1991), p. xvi.

ponder the dead, but not the other way around. Yet in this case, he gets better, she gets sick: he does not die in time for the obituary truly to fulfill its generic purpose.

White Glasses = HIV

Why white glasses? Sedgwick declares that she “met” Michael Lynch and “fell in love with his white glasses” (p. 253). Though the essay functions as an obituary for Michael Lynch, its focal point is his white glasses, and the white glasses that she eventually acquires for herself in order to be more like Michael Lynch. One suspects that there is more going on here, that there is an investment in, one might say a libidinal cathexis of, the white glasses. Indeed, one might observe that the opening of the essay--in which Sedgwick describes her reaction to the white-framed glasses sported by Michael Lynch when she meets him at an MLA convention in 1986--is not unlike, more generally, initial projections of the epidemiology of the AIDS epidemic:

“Within two months, every gay man in New York is going to be wearing white glasses.” My second thought: “Within a year, every fashion-conscious person in the United States is going to be wearing white glasses” (p. 252).

Her resolution is a wish for identification that colors the whole of this essay, “an identification best symbolized by her remarkable eye wear”⁵⁴; her “instant resolve: ‘I want white glasses first’” (p. 252). Indeed, this is where she looks for white glasses: “New York, northern California, and Massachusetts” (p. 254), the first two recognized epicenters of HIV infection and the latter, particularly the Western Massachusetts where she was based as an academic, a fantasy geographical alternative community with a reputation as an area friendly to gay and lesbian lifestyles. Sedgwick was at the time teaching at Amherst College and Massachusetts was her home. “[I]n the

⁵⁴Kevin Kopelson, “Fake it Like a Man,” in David Bergman, ed., *Camp Grounds: Style and Homosexuality* (Amherst: University of Massachusetts Press, 1993), p. 265.

intervening time,” however, “the predicted fashion craze had entirely failed to materialize” (p. 254); much the way, it might be said, that the HIV epidemic among heterosexuals--the “general population”--failed to materialize in the proportions predicted. Particularly, HIV did not proliferate wildly among white women. However, like HIV, white glasses as a fashion accessory does proliferate in more contained gay male communities, in this case among a community of gay male academic disciples of Sedgwick:

when I heard “White Glasses” at a lesbian and gay studies conference in the Spring of 1991, *my* instant resolve, upon which, needless to say, I acted immediately, was: “I want white glasses, too.” I had a “magical faith” that, if properly accessorized, I could make people see me, if not read me, as Eve Sedgwick.⁵⁵

The essay facilitates, for Sedgwick and also for others, a sense of identification (among gay men, among whom Sedgwick counts herself) through the shared “accessory” of white glasses.

In other words, though the essay is Sedgwick’s obituary for Michael Lynch, it is also significantly about herself: about her wish to be like Michael Lynch, about her identification with him, and about her identification with him specifically through what I will claim is a fantasy introjection of his white glasses, or his HIV.

The meeting with Michael and the focus on the white glasses, becomes for Sedgwick the nexus of two “scenes” of identity, one inveterate and one nascent: she describes the “I who met Michael and fell in love with his white glasses” as

someone who had it at heart to make decisive interventions on two scenes of identity that were supposed not to have to do with each other: the scene of feminism, where I “identified” and which I knew well; and the scene of gay men’s bonding, community, thought, and politics, a potent and numinous scene which at the experiential level was at that time almost totally unknown to me (pp. 253-254).

⁵⁵Kopelson, p. 266; emphasis in the original.

The white glasses are the transitional focus for this “queer but long-married young woman whose erotic and intellectual life were fiercely transitive” (p. 253) to identify “as a gay man” (p. 256). Indeed she identifies “the series of uncanny effects around these white glasses” to have been “formative of my--shall I call it my identification?...my identity?--as a gay man” (p. 256).

As further evidence for this metonymic relationship between the white glasses of this essay and HIV, Sedgwick refers to the “prevalence” of white enameled glasses (p. 258), “prevalence” being a word strongly associated with epidemiology. One refers to a prevalence of infection, or a prevalence of AIDS cases. Prevalence is defined as “the number of persons in a given population with a disease or an attribute at a specified point in time.”⁵⁶ It is rather unusual to refer to a prevalence of a certain fashion accessory. She refers also to the “white stigma of our glasses” (p. 257), stigma being another referent often attached to HIV.

It is possible to read the metonymic relationship between white glasses and HIV as including, or connecting metonymically by way of, white blood cells, particularly as white blood cells, or lymphocytes, are a marker of AIDS illness (T cells are a “subset of lymphocytes”⁵⁷ that has traditionally allowed one to know how well or ill someone is who is HIV infected), and additionally through the metonym of whiteness. White blood cells are the “spectacles” of AIDS. You can see how sick someone is, or, indeed, if they have AIDS, through this marker. Further, white blood cells as well provide a marker for the illness that Sedgwick has, breast cancer. In this way it is this whiteness--white blood cells--that serves as the link between white

⁵⁶Edward King, *Safety in Numbers: Safer Sex and Gay Men* (New York: Routledge, 1993), p. 3.

⁵⁷Edward King, Peter Scott, and Peter Aggleton, “HIV and AIDS,” in Peter Aggleton, Kim Rivers, Ian Warwick, and Geoff Whitty, eds., *Learning About AIDS: Scientific and Social Issues*, 2nd ed. (London: Churchill Livingstone, 1994), p. 16.

glasses and HIV, and also as the common marker for her illness and for his.

(However they are opposite markers: one illness is indicated by a profusion of white blood cells, the other by a deficiency. Just like the white glasses for Sedgwick and for Lynch are opposite markers: on her “[w]hite the pastel sinks banally and invisibly into the camouflage of femininity, on a woman, a white woman. In a place where it doesn’t belong, on Michael, that same pastel remains a flaming signifier” (p. 255).)

Incorporation of the lost object is a signal of melancholia. Incorporation can take place, literally, through the mouth, or in some penetrative way so that the lost object, or a part of the lost object, is inside one. In the fantasy of incorporation one attempts to introduce “all or part of a love object or a thing into one’s own body.”⁵⁸ According to this model mourning becomes melancholia when one is impeded from introjecting part of the lost other, or when one refuses to introject the lost other; one therefore turns to the fantasy of incorporation. For Eve Sedgwick in relation to Michael Lynch, there are two reasons that make it difficult for her to introject Michael as she would like, in order to facilitate the process of mourning him. One (though this alone would not prevent her from beginning the process of mourning) is that he is not dead yet. The other is that the part of him that she would introject, that would make her most like him and would most represent him, is his HIV. This would also be the easiest aspect to take in, to have injected or penetrated. Because this is not reasonable--because this utter identification would dematerialize the self required to continue living (or writing)--the white glasses become a metonymic stand-in (magically taking on HIV’s power) for the introjection (though later I will suggest the

⁵⁸Abraham and Torok, “Mourning *or* Melancholia: Introjection *versus* Incorporation,” p. 126.

possibility of incorporation) of the lost Michael through the overdetermination of the white glasses.

Identification with the lost object--Michael Lynch--is attempted, in other words, through a cathexis with the white glasses of Michael's that Eve covets, and a simulacrum of which she searches for and manages finally to acquire:

The first time I met Michael Lynch, I thought his white-framed glasses were the coolest thing I had ever seen (p. 252).

Immediately she decides, "I want white glasses."⁵⁹ "Eventually, Sedgwick does locate a pair of Lynch's signature 'patio-furniture' frames, a pair that...promises to bridge the gender/sexuality gap that separates her from her new friend."⁶⁰ The overwhelming emblem of her wish to incorporate Michael, the anticipated lost object, is her claim of identity as a gay man. For Sedgwick, her relationship with Lynch satisfies her identification as a gay man, and so his loss means more to her than just the loss of him, as her friend, but is also the loss of him as her link to that particular identity:

At the completion of [the] process of *Trauerarbeit*, the ego "becomes free and uninhibited again" and capable of cathecting new love-objects.

⁵⁹In Michael Lynch's own essay, "Terrors of Resurrection," the act of identification with Sedgwick is not through white glasses--though they are mentioned, they mean something different for him than for her--but through Eve Sedgwick herself. He introjects her not through cathexis with an inanimate object, but through her as herself, as "Eve Kosofsky Sedgwick," pillar of a particular academic community. He writes the essay in her voice and provides the signature, in quotation marks, "By Eve Kosofsky Sedgwick" (Michael Lynch, "Terrors of Resurrection, 'By Eve Kosofsky Sedgwick'" in Judith Laurence Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* [Chicago: University of Illinois Press, 1993]). In Edmund White's book, *Sketches from Memory* the cathected objects are most likely Hubert Sorin's drawings, almost all of them including a depiction of White. White's identification with Sorin is through his own image. Additionally, White unwittingly locates an object cathexis in Sorin's pen: "I'm writing this page with his beautiful Art Pen which he always forbade me to touch" (p. 2). In these texts the identification is with the image one has created of the lost other. The writing itself becomes an object--the object through which cathexis becomes identification. Freud writes that in melancholia an object-cathexis is replaced by an identification ("Mourning and Melancholia," p. 258).

⁶⁰Kopelson, p. 265.

In the case of melancholy, the pattern by which loss is worked through is different because the love object fulfilled a rather different function in the psychological life of the bereaved.⁶¹

It is through the melancholic strategy of identifying with Lynch by way of his white glasses/HIV that Sedgwick can presume to continue to satisfy her identification as a gay man.

If identification is the “process or effect of identifying with others (a) through lack of awareness of separation or difference, (b) as a result of perceived similarities, or (c) through introjection of the other within the ego as a reaction to loss,”⁶² then Sedgwick identifies with Lynch on a number of levels. Not only does she perceive similarities between them, but it “sometimes amazes me,” she writes, “that anyone can tell us apart” (p. 257).

On the dedication page of *Tendencies* there are two photographs of her and Michael taken at the grave of Emily Dickinson. In them they are both sporting white-framed glasses. It is not clear whether Sedgwick requires glasses, for in the author photograph she does not wear any. In an unexpected moment in the essay, she worries that she and Michael might confuse their glasses, walk away with each other’s:

When I am in bed with Michael, our white glasses line up neatly on the night table and I always fantasy that I may walk away wearing the wrong ones (p. 257).

This confusion is only possible if, by some coincidence, they both require the same prescription, or, if neither of them need a prescription at all, and they are purely fashion-bound, if the glasses are only props for a “performance.” (The confusion is

⁶¹Eric L. Santner, *Stranded Objects: Mourning, Memory, and Film in Postwar Germany* (Ithaca and London: Cornell University Press, 1990), p. 2.

⁶²Janet Sayers, in Elizabeth Wright, ed., *Feminism and Psychoanalysis: A Critical Dictionary* (Oxford: Blackwell, 1992), p. 167.

also possible if their identification is so total that they are confused about who of them is whom.) But she counters, “[s]o often I feel that I see with Michael’s eyes--not because we are the same, but because the same prosthetic device attaches to, extends, and corrects the faulty limb of our vision” (p. 257). It is the white glasses that makes possible her identification with him.

Sedgwick’s essay seems initially to be a work of mourning. What I mean by this, primarily, is that it is engaged in the work of introjection as a response to loss. This, according to Freud and also Abraham and Torok, places it firmly in the realm of mourning. However, the terms are slippery. From Freud to Abraham and Torok to Butler, introjection slides often into incorporation. When Butler writes that melancholy, according to Freud, is the “unfinished process of grieving,” and that “identifications formed from unfinished grief are the modes in which the lost object is incorporated and phantasmatically preserved in and as the ego,”⁶³ it does not sound as though she is describing a severely pathological process, as Abraham and Torok tend to characterize the processes of incorporation. In fact, Butler’s case here, following Freud, is that the incorporative processes of melancholia are constitutive of the formation and development of the ego itself (Freud writes that it is “possible to suppose that the character of the ego is a precipitate of abandoned object-cathexes”⁶⁴). She draws on Freud’s post-“Mourning and Melancholia” writing on identification in “The Ego and the Id,” where the processes of identification and incorporation seem to be conflated, that is, where identification can be understood to *require* incorporation.

⁶³Judith Butler, *The Psychic Life of Power: Theories in Subjection* (Stanford, CA: Stanford University Press, 1997), p. 132.

⁶⁴Freud, “The Ego and the Id” (1923), in Angela Richards, ed., James Strachey, trans., *On Metapsychology: The Theory of Psychoanalysis*, The Penguin Freud Library, Vol. 11 (London: Penguin, 1991), p. 368.

Butler suggests that Freud affiliates “the incorporation of the attachment as identification, where identification becomes a magical, a psychic form of preserving the object.”⁶⁵

Freud describes as introjection the “setting up of the object inside the ego.”⁶⁶ What we normally think of as mourning--the process of letting go of the lost object--is described by Butler however in rather melancholic terms:

letting the object go means, paradoxically, not full abandonment of the object but transferring the status of the object from external to internal. Giving up the object becomes possible only on the condition of a melancholic internalization or...a melancholic *incorporation*.⁶⁷

Thus as incorporation is “the matrix of introjection and identification”⁶⁸ it is often difficult in the theory to distinguish properly between introjection and incorporation.

There are some ways that Sedgwick seems to be not just introjecting Michael but incorporating Michael through the metonymic chain of signifiers from his (and her) white glasses to his white blood cells (by way of her own white blood cells) and ultimately to his HIV, his illness with AIDS.

I am suggesting that the essay wavers between mourning and melancholia, between introjection and incorporation. It can be argued that Sedgwick’s introjection of Michael through the white glasses is not an act of introjection only, but also constitutes an act of incorporation. If white blood cells are, as I have contended, the nexus of the metonymic link between the white glasses Sedgwick seeks (and finds: “It took me a year and a half...to find glasses that I thought looked like Michael’s,” p. 254) and his original white glasses, she has indeed seemed to have taken on in excess his deficiency of white blood cells. Her illness is, practically, a convexity to his

⁶⁵Butler, *The Psychic Life of Power*, p. 134; emphasis in the original.

⁶⁶Freud, “The Ego and the Id,” p. 368.

⁶⁷Butler, *The Psychic Life of Power*, p. 134; emphasis in the original.

⁶⁸Laplanche and Pontalis, p. 212.

concavity, a mirror image of his. Though “shock and mourning gaze in both directions through the obituary frame” (p. 256), she sees herself in him in a mirror image. What he is deficient in--what he has lost--she takes up, incorporates into herself. It is when she thought he was dying (his white blood cells dwindling) that she becomes aware of her own illness (her proliferating white blood cells):

Unreflecting, I formed my identity as the prospective writer of this piece around the obituary presumption that my own frame for speaking, the margin of my survival and exemption, was the clearest thing in the world. In fact it was totally opaque: Michael didn’t die; I wasn’t healthy (p. 255).

The white glasses she seeks, and sports in the dedication photograph and so therefore obviously has taken on (“That’s right,” says a friend of Michael’s, “I did notice that you and Michael both wear those patio-furniture glasses” p. 257), are only the plastic representation of what she has proliferated in her body as though eerily to compensate for what he has lost.

Sedgwick, in describing this time of her friend’s recovery and her own dwindling vitality connected to her diagnosis with breast cancer, refers to “the tremendous plenitude of the energies he somehow had available to inject into me” (p. 260). It is a suggestive description for the experience of her taking into herself at the time of her illness something that is Michael’s, energies that “came from in Michael” and “produced as if magically by my need of them,” energies “inject[ed] into” her that were “carved directly out of Michael’s substance” (p. 260). It is also interesting that it is Michael’s “energies” she refers to as injecting into herself. In mourning the libidinal cathexis⁶⁹ must, albeit with resistance, be detached from the lost loved one

⁶⁹“Cathexis” refers to “the fact that a certain amount of psychical energy is attached to an idea or to a group of ideas, to a part of the body, to an object, etc.” Laplanche and Pontalis, p. 62.

and reattached to a new object. In melancholia, however, the object-cathexis is “not displaced on to another object” but is “withdrawn into the ego.”⁷⁰

Sedgwick’s essay can be seen as a negotiation between introjection and incorporation, between the work of mourning and refusal to mourn. Having made the distinction between introjection and incorporation, I have tried to suggest that “White Glasses” blurs that distinction. On one hand the Eve Sedgwick of the essay manages to engage in the work of mourning through an identification, that is, an introjection, of Michael through his white glasses. On the other hand, Sedgwick pre-empts, and in that way seems to refuse the loss of, Michael, in the gesture of the pre-death obituary (and in her fetishization of his white glasses, which I will discuss shortly) that seems, for that refusal, melancholic and incorporative. One significant way that Sedgwick incorporates Michael is not through her own body--for incorporation on the Abraham and Torok model requires a corporeal enactment of what introjection does metaphorically, or psychically--but through the body of her text. What Sedgwick *is* doing is literally incorporating Michael into her text (his obituary) before he dies. She can allow (that is, work through) the eventual loss of Michael because she has refused it (forever) in print. In that essay Michael is always “alive and full of beans (p. 256), she always is, at the end, invoking and addressing Michael (“Hi Michael!” p. 266).

Having looked at the ways that the essay “White Glasses” functions as a paradigm for the processes of introjection and incorporation that characterize the mourning and also the melancholia of queer AIDS literature, I would like to look now at the ways in which the queer AIDS texts, in functioning melancholically, also then challenge and transgress ontological borders. The melancholic mechanism of incorporation allows the grieving individual to engage in a fantasy of introducing the

⁷⁰Freud, “Mourning and Melancholia,” p. 258.

lost other magically within the confines of the morphological body. The queer AIDS texts similarly ignore conventionally impermeable metaphysical borders, such as life and death.

Fetish

I have claimed that melancholic writing is sustained in part by the structure of incorporation, but there is something else occurring here; there is another dimension, which is the fetish. Melancholia involves incorporation of the lost object. This process of incorporation is related to the fetish in that the fetish attempts to sustain something that is not there (or will not be there) and that one must replace, even pre-empt, rather than lose.

It is typically understood in traditional psychoanalytic thinking that women are not subject to fetishism:

In psychoanalytic discourse, fetishism is a uniquely male perversion. With very few exceptions in the psychoanalytic literature it has been pretty well agreed that fetishism is a male perversion, and its existence in women is assumed to be impossible.⁷¹

There has been lot written recently over the contention of psychoanalytic thinking that women do not produce fetishistic structures. The argument is that they have no phallus to lose, so they cannot be--do not need to be--fetishists. The traditional fetish is understood to be "a substitute for the woman's (the mother's) penis that the little boy once believed in and...does not want to give up."⁷² In Freud's essay, fetishism is "defined as an exclusively masculine perversion which consists in deriving sexual

⁷¹Elizabeth A. Grosz, "Lesbian Fetishism?" in Teresa de Lauretis, ed., *differences*, Vol. 3, no. 2, Summer 1993, p. 39.

⁷²Freud, "Fetishism" (1927), in Angela Richards, ed., James Strachey, trans., *On Sexuality*, The Penguin Freud Library, Vol. 7 (London: Penguin, 1991), p. 352.

gratification from the association of a female sexual object with a fetish, generally an inanimate or partial object.”⁷³

However, against this tradition of understanding fetishism as an exclusively male perversion, there are propositions contesting the exclusivity of male fetishism:

While in one sense I do not want to disagree with this claim--in psychoanalytical terms it makes no sense for women to be fetishists, and it is unimaginable that women would get gratification from the use of inanimate objects or mere partial objects *alone*--in another, more strategic and political sense, it seems plausible to suggest...that there *can* be a form of female fetishism.⁷⁴

One argument that allows women to have fetishes is thus: “fetishism is possible in females who believe themselves to be male.”⁷⁵ Sedgwick leaps over the entanglements of the contentions against female fetishism precisely by identifying as a man (“my identity...as a gay man”). Nevertheless, I contend, there are further reasons why the Sedgwick of the essay “White Glasses” is a candidate for fetishism.

The white glasses are in part a fetish that metonymically connects Sedgwick to Lynch’s HIV. Upon meeting him Sedgwick writes that she experiences an “instant, fetishistic crystallization of him through those white glasses” (p. 253). She recognizes that her attraction to him by way of the white glasses is fetishistic, and that it is loss itself, the possibility of intimate loss that forms the undercurrent of her attraction to him and her identification with him: she writes that

Michael’s availability to be identified with and loved, in my instant, fetishistic crystallization of him through those white glasses, must have had everything to do with my witness of this moment (p. 253).

⁷³Naomi Schor, in Wright, p. 113.

⁷⁴Grosz, p. 39; emphasis in the original.

⁷⁵Grosz, p. 47.

The moment she refers to is Michael's conveying the information to friends at the conference of his lover's AIDS diagnosis, a man, Bill Lewis, "who was to die suddenly the next fall" (p. 253) and whose loss, while rendering "Michael available to my identification and love, [made him] opaque to my knowledge" (p. 253). In other words, part of what attracts her to him is his own relationship with loss, the lack that he himself anticipates. The "economics of melancholia," Schiesari suggests, "produce[s] a fetishizing of...loss itself."⁷⁶

In Naomi Schor's terms, the "fetish is a substitute for the mother's missing penis; it commemorates the scene where the little boy sees the mother's genitals and simultaneously denies his perception of her castration, lest the same fate befall him."⁷⁷

However, "Freud does not explain why the fetish object must be read as a substitute for the mother's (absent) penis, and not, say, as a substitute for the father's (absent) breasts."⁷⁸ The breast is a marker of sex differentiation, in the same way that the phallus is. And women really can lose this marker (in a way that men are afraid often that they will lose theirs, but hardly ever do) in such a situation as Sedgwick's, who in her essay recalls the time of her "diagnosis and mastectomy" (p. 260).

After all, what is the difference between a fetish and a prosthesis? Nothing; a fetish is a psychic (psychological) prosthesis, an object meant to stand in for the missing (original) object. Sedgwick refers to her "new experience of amputation and prosthesis" (p. 256), how "[j]ust getting dressed in the morning means deciding how many breasts I will be able to recognize myself if I am wearing" (p. 263). Though in one section she refers to the "prosthetic device" she shares with Michael--their white

⁷⁶Schiesari, p. 47.

⁷⁷Schor, p. 114.

⁷⁸Anne McClintock, "The Return of Female Fetishism and the Fiction of the Phallus," in *New Formations*, No. 19, Spring 1993, p. 4.

glasses--to correct "the faulty limb of our vision" (p. 257) it is her breast, her own "faulty limb," for which the white glasses are yet another signifier.

"We know from psychoanalytic experience," writes Freud, "that anxiety about one's eyes, the fear of going blind, is often enough a substitute for the dread of being castrated."⁷⁹ This connection between the fear of injury to the eye and castration, and, therefore, the eye with the phallus, is strongly suggested in Sedgwick's essay, as she writes suggestively, that "[s]o often I feel that I see with Michael's eyes--not because we are the same, but because the same prosthetic device attaches to, extends, and corrects the faulty limb of our vision" (p. 257). The eye as limb ("faulty limb") and the glasses as prostheses, stand in for phallus as well as breast, precisely the thing that Sedgwick has already given up: the loss she wasn't expecting (that of her breast) but that has already befallen her, rather than the anticipated loss of Michael.

Elsewhere, Freud writes suggestively, and cryptically, that "if we find that an organ normally serving the purpose of sense-perception begins to behave like an actual genital when its erotogenic role is increased, we shall not regard it as improbable that *toxic* changes are also occurring in it."⁸⁰ When Sedgwick writes "I feel that I see with Michael's eyes," she implies that she can experience Michael's phallus from Michael's perspective. They are both constrained to bear prostheses to correct for the faulty limb, for Michael the penis that is now potentially dangerous, and for Eve the breast that was so dangerous it had to be removed.

⁷⁹Sigmund Freud, "The Uncanny" (1919) in Albert Dickson, ed., James Strachey, trans., *Art and Literature*, The Penguin Freud Library, Vol. 14 (London: Penguin, 1990), p. 352.

⁸⁰Freud, "The Psycho-Analytic View of Psychogenic Disturbance of Vision" (1910), James Strachey, ed. and trans., *The Standard Edition of the Complete Psychological Works of Freud*, Vol. 11 (London: The Hogarth Press, 1957), p. 218; emphasis in the original.

It is worth commenting here on Freud's notion of the uncanny, because of the link it forms between fetishism and seeing, a link that is made apparent in Sedgwick's fetishization of Lynch's glasses. Although the fetish and the uncanny seem to exemplify opposite phenomena--the fetish is the scene of deficiency (one is pre-emptorily replacing what one can't bear to find missing), and the uncanny is the scene of doubling (of excess)--they are connected here in an important way. The uncanny, is "concerned with the phenomenon of the double."⁸¹ "Thus we have characters," writes Freud,

who are to be considered identical because they look alike. This relation is accentuated by mental processes leaping from one of these characters to another...so that the one possesses knowledge, feelings and experience in common with the other. Or it is marked by the fact that the subject identifies himself with someone else, so that he is in doubt as to which his self is, or substitutes the extraneous self for his own.⁸²

Further, "the 'double' was originally an insurance against the destruction of the ego, an 'energetic denial of the power of death', as Rank says."⁸³ The double protects the primary ego. Melancholia is a breakdown of self-esteem, of the ego, bringing us back to primary narcissism, which in the context of AIDS literature suggests that the writers of the melancholic AIDS texts are afraid, not only of the loss of a phallus or friend, but of their own demise, for which the fetish might be expected to provide a talismanic protection.

If a fetish is a replacement for the missing phallus of the woman (mother), it is also the mask that obscures the difference between a missing and an existing phallus, that obscures whether the sought after object is there or not (the object, that is, that will reassure one that one will not lose one's own penis, say, or vision, or health, or

⁸¹Freud, "The Uncanny," p. 356.

⁸²Freud, "The Uncanny," p. 356.

⁸³Freud, "The Uncanny," p. 356.

life). The talismanic fetish preserves presence, but it does so only through melancholic ambivalence:

The fetish is a curious and fascinating compromise formation between the horrified recognition of female castration and its vehement denial, or disavowal.⁸⁴

This ambivalence is most ostensibly exemplified by the dialogic nature of the melancholic AIDS texts.

Dialogue as Internalization of the Other

Nearly all the queer AIDS texts are dialogic in a way that I believe represents a “running start” to the dialogue that is, in effect, the internalization of the other. In melancholia this follows the death of an other whom one cannot bear to lose and is an indication of the ambivalence one feels toward the other and toward the loss of the other. The internalized dialogue as Freud characterizes it is usually characteristic of an altercation or dispute. When the object is ultimately lost, “the object is ‘brought inside’ the ego where the quarrel magically resumes as an interior dialogue between two parts of the psyche.”⁸⁵ However, though there is ambivalence detectable in the nature of the dialogue in the queer AIDS texts, I do not think that the dialogues manifest themselves necessarily as quarrels, but rather as a way of sustaining the lost other by carrying on a conversation with him that was begun before the other was gone, a way even to refuse the loss of the other. Freud remarks that the “conflict within the ego” is what melancholia “substitutes for the struggle over the object.”⁸⁶ It is as if the internalized dialogue is another kind of fetish standing in the place of the other who can no longer speak because he is dead: a signifier of, but also a substitute

⁸⁴Schor, p. 114.

⁸⁵Butler, *Gender Trouble*, p. 61.

⁸⁶Freud, “Mourning and Melancholia,” p. 268.

for, absence. The internalized dialogue is a way both to sustain the lost other and to deny that he is gone.

Internalizing the lost object in the form of a sustained dialogue with that object can function within the psyche along the lines of the model of incorporation that I discussed in relation to Sedgwick's identification with Lynch in "White Glasses." "The melancholic...begins to mime and incorporate the lost one, refusing the loss through that incorporative strategy, 'continuing the quarrel' with the other."⁸⁷ The dialogic nature of the queer AIDS texts allows the refusal of the other's potential loss or demise; it sustains the other within the corpus of the text.

If involvement in dialogue is a melancholic strategy to sustain, or keep present, the lost other, it is interesting to note in this context that all the queer AIDS texts under consideration here are narrated to some extent in the form of dialogues, or at least as exchanges between two individuals or entities. This can be demonstrated in the following ways: Edmund White in the introduction to *Sketches from Memory* exposes the ways that White and Sorin agreed to, had trouble with, and finally succeeded in working together in tandem, thus emphasizing the nature of their collaboration as an ongoing discussion between them of sorts, rather than as a unitary vision that they both shared. White writes that Sorin "always wanted us to work on a book together, but I've never liked collaborations. Nor did I think I could find a tone that would go with his drawings" (p. 3). Though eventually White finds a way to work with Sorin, sometimes trailing behind him before he can find the "right tone": "At first he worked far ahead of me, although in the last two months I caught up with him" (p. 4).

⁸⁷Butler, *The Psychic Life of Power*, p. 161.

Further, the essays by Sedgwick and Lynch taken together can be seen also to form a kind of dialogue. Sedgwick, in her paper, addresses Lynch in her closing remarks: “Hi Michael!” she exclaims, “I know I probably got almost everything wrong but I hope you don’t just hate this. See you in a couple of weeks” (p. 266). And Lynch in turn is in dialogue in a rather more internalized way by writing his essay in the voice of, and also in the name of, Sedgwick.

Most works of literature, whether fiction or not, participate in dialogue, or at least a communication, of some kind. By the nature of their public status--published book or delivered speech or essay--they function as communications to an audience or readership. That these queer works function as dialogues themselves or as interlocutors in an extratextual dialogue (as in the case of Sedgwick and Lynch, and perhaps, his book suggests, in the case of Guibert and his readers) marks a self-consciousness about the nature of public communication.⁸⁸

In the queer AIDS texts dialogue has a crucial function. That much of Carole Maso’s novel is conveyed in the second person, suggests that the book is an internalized dialogue with the dead object made external, rendered textual. In *The Art Lover*, in passages thus written in the second person, Carole/Caroline addresses her dead father as well as her dying and then dead friend Steven/Gary (in fact, the letters that distinguish the “real” character, Carole, from the fictional character, Caroline, form the word “in,” suggesting that Carole is outside the text and Caroline is “in” the

⁸⁸The gay AIDS fiction considered in Chapter 2 also address (or at least anticipate) an audience, immersed as it is in a (short) history of gay and lesbian writing and publishing, but does not do so self-consciously. Indeed, that is the nature of realist fiction, that it plunges the reader into a world that does not admit of fabrication. There are no gaps in a realist text, precisely because of its effort to re-create the real-time real-action feel of the narrative. By participating self-consciously in dialogue, the queer AIDS literature emphasizes its difference from realist fiction, and exposes the disruption of time, of fantasy, of conventional narrative that it embodies.

text, a fictionalized, internalized Carole); Sedgwick and Lynch each are writing essays significantly for or about each other; Edmund White creates his stories in concert with Sorin's illustrations; and Guibert's book is addressed in its title "to the friend who did not save [his] life." Insofar as these works of literature can be represented as dialogues, they can be seen to reflect the inner dialogue that is supposed to be the result of the internalization of the lost object that is the work of melancholia. These works are manufactured out of the loss of the other, insofar as they are attempts to sustain the lost other through sustaining a dialogue with them or with a representation of them. "The melancholic ego, in order to authenticate its conflicted relation between *innen* and *umwelt*[,] inner and outer world, is dependent on loss as a means through which it can represent itself."⁸⁹ Any relationship that ends in loss is by that fact incomplete or unresolved, hence the ambivalence that can follow the loss: "[p]recisely because that object is lost, even though the relationship remains ambivalent and unresolved, the object is 'brought inside' the ego where the quarrel magically resumes as an interior dialogue between two parts of the psyche."⁹⁰ The texts are a running start of the dialogue that will continue to take place intra-psychically once the dying object is gone. They are preparations for and anticipations of the work of melancholia.

Although each of the queer AIDS texts exemplifies this dialogic internalization in some form, it is Edmund White and Hubert Sorin's collection *Sketches from Memory* that best illustrates it, and which will serve here as my paradigmatic example. Though I have suggested that the interlocution in *Sketches from Memory* is between White and Sorin in the way that text and illustration

⁸⁹Schiesari, pp. 42-43.

⁹⁰Butler, *Gender Trouble*, p. 61.

interplay with each other, there is already an indication in the book that the dialogue has moved from being one between the two men to one that exists within the text of White alone. This exemplifies the dialogue with the other that has been internalized to form an interior dialogue in anticipation of the loss of the other.

White's text is written in conjunction with Sorin's drawings. In fact, as I have mentioned, White's writing initially lags behind Sorin's drawings so that "[a]t first he worked far ahead of me, although in the last two months I caught up with him" (p. 4). White writes in response to Sorin's drawings; he indicates in the introduction that he "pitched the book to vibrate to the tautness of [Hubert's] sensibility" (p. 7). Although the text and drawings are meant to go together--to accompany each other--the text at times departs from the illusion that Hubert is always well, while the drawings do not. White comments on this in the introduction, that the "slightly childlike, perhaps *faux-naïf*, certainly stylized quality of words and images" contributed to a collusion between them, "[a]lthough we never talked about it," that they would not refer to Hubert's illness:

this tone conjoined us to silence about AIDS; it was our undoubtedly absurd notion of gallantry that made us pretend (in his drawings) that his body was not aging and wasting away or (in my chapters) that we had nothing more serious to do than loaf in the streets and give dinner parties. All bluff, since towards the end we seldom saw anyone or went anywhere. Hubert came to despise his emaciated body, but in his drawings he remains as dapper and handsome and *élancé* as he was the day I met him, five years ago (pp. 7-8).

However, White does not keep up his part completely in the collusion, because even outside the introduction, in the words he writes to accompany Sorin's drawings, he cannot help but mention the illness occasionally, and the daily life that illness has actually become for them. Even the opening essay suggests that it is unusual for them to be in bed in the daytime, but it does not establish why they are. The opening sketch

shows Hubert in bed and White standing on the balcony overlooking the street below. It is their dog Fred who “was wondering why we were already in bed when he hadn’t had his late-night walk and it was still light out” (p. 11). There is no suggestion that being in bed is about sex or about illness, two obvious reasons why people might take to their bed out of the regular order of the day. In a chapter on their concierge (who is herself frail and practically immobile, yet Hubert, who depicts himself throughout the book as healthy, even when he is deteriorating, draws a series of sketches of their concierge dancing) White writes that she “knows Hubert is ill and when he’s in a bad way she’ll offer to shop or cook for us” (p. 34). In a chapter that accompanies a drawing that shows Sorin and White, both looking robust, if only a little unbalanced by the antics of their basset hound Fred and entangled in his leash, White admits that as “Hubert becomes frailer and frailer and Fred even heftier, we keep worrying that one day Fred will spot an alluring dog in the distance, go ballistic and drag a hundred-and-twenty-pound Hubert along behind him” (p. 70). Finally at the end of the book, concluding a chapter on the decorations in their apartment, White comments that “Hubert has said from the beginning that he’s decorating it for me so I’ll have a place to live after he’s gone, though I can scarcely imagine rattling around it alone” (p. 118). It is only in this final chapter that the drawing bears no obvious relation to the content of the chapter, that is all about their apartment’s *objets d’art*, though the drawing shows them both in silhouette with Fred between them, gazing in the distance at the Tour St-Jacques. It is at the end of the text that White cannot sustain the dialogue with the living Hubert, and departs into his own reminiscence of the artifacts he and Hubert have accumulated over the years that ends with him anticipating “rattling around...alone.”

What White is straining to keep out of his whimsical representations of their daily life together, shopping in the neighborhood for their groceries, lingering in his favorite local cafe, perusing the nearby bookstores, consorting with Claude and Paloma Picasso (pp. 55-57), attending fashion shows with Julian Barnes (p. 25), meeting Tina Turner (p. 26), is that his time is consumed with taking care of Hubert, “waking up five times a night to change the sheets, holding his hand while he’s vomiting or shitting, plugging in the catheter, and...[l]eading a very, very reduced life,” in which they actually “don’t see anyone...don’t go out...don’t do anything.”⁹¹ In *Sketches from Memory* White only comments delicately that “I’m sometimes worried he won’t have enough time left to do the pictures” (p. 113). Although White’s and Sorin’s respective “sketches” are meant to act as comments and rejoinders to each other, in fact Sorin’s sketches are maintaining a fiction of their former life together, while White’s essays are unable to sustain that fiction absolutely, admitting into his text the “reality” of Sorin’s imminent demise.

The internal dialogue that White engages in that he can no longer pursue with his dying and then dead lover, is manifested in White’s negotiations in the text with expressing in English a life that he lives with his French lover in a French-speaking world. Throughout the book’s stories White is pointing out the subtle difference that the French word brings, or he slips in a phrase in French without remarking on it, giving it a better context for an anecdote or utterance. This occurs in the first chapter, in which White is describing what he and Hubert hear outside the windows of their apartment in Paris: when he describes the pigeons as “cooing” he immediately adds, parenthetically, that “*roucoulement*, the French word, gives a better sense of the

⁹¹Edmund White, Interview, in Thomas Avena, ed., *Life Sentences: Writers, Artists, and AIDS* (San Francisco: Mercury House, 1994), p. 223.

deep-throated, glottal contentment of the sound.” (p. 11). In another chapter on the concierge of their apartment building White comments on how “the French protect their privacy with a sacred fury and prefer the permissiveness of sophisticated silence to the pleasure of spicy gossip,” and again adds parenthetically the alternative, more resonant, French word: “or ‘crusty’ as the French say--*croustillant*” (p. 27). He also comments, in a chapter describing the food shopping he does everyday, on the local neighborhood “fish man” and the “lovely expressions” he uses to convey fish recipes to White: “‘a tear of wine’ (*une larme de vin*), ‘a suspicion of ginger’ (*un soupçon de gingembre*), or ‘a cloud of milk’ (*un nuage de lait*) or ‘a nut of butter’ (*une noix de buerre*)” (p. 15). White’s text is so inflected with Sorin’s language, I am suggesting, as a way of internalizing the most obvious aspect of differentiation between White and Sorin.

While it is natural, since Hubert Sorin is French and Edmund White American, that there is bound to be some negotiation between and among languages, I would like to suggest that this negotiation in the text is representative of the running start of the interior dialogue that is an indication of melancholia. An anecdote in Chapter 3 of *Sketches from Memory* concerns an amusing misunderstanding between “the famous couturier Azzedine Alaïa” and the “American painter Julian Schnabel,” whereby each man tells “conflicting versions” of their first encounter, in response to White’s query of how they had met, “each happily insulated in his own language.” “Each man,” White reports, “finished his answer with a big smile, sure he’d just confirmed what the other had said” (pp. 20-21). This anecdote reveals not only White’s mastery of both languages, but is also an indication that at times he is the sole master of both languages, that while others cannot communicate successfully, he has all the

communication within him. It is a chapter that contains no mention of Sorin, already a suggestion that any possible communication between French and English is within him alone. In other words, White is exhibiting in this text a conversation that he is having with himself in two languages: his own native language and that of his dying lover.

In the second to last chapter there is no illustration and Sorin doesn't figure at all. There are no French words. This chapter anticipates the very last vignette where, as I mentioned, Hubert is included but principally as someone who is connected to the artifacts of the apartment that will serve as memorials to the dead Hubert and as someone who is preparing the apartment for White to live in after Hubert's death. The last vignette has an illustration--the silhouette of Edmund, Hubert, and Fred against the image of the Tour St-Jacques--though it doesn't match the story. The penultimate vignette however has no illustration and no mention of Sorin. White mentions their dog Fred, but not Sorin. White is already here preparing to let Sorin go, give him up. It is a rehearsal for life without him.

Like the first vignette, where Edmund and Hubert, "lying in bed one evening after dinner" (p. 11), hear "a street singer's strong, even strident voice" (p. 12), the penultimate story has White and a companion hearing "a young woman's voice, penetrating and perfectly pitched" (p. 112) from the street outside and below the window to his flat. However, it is not Hubert with him in this story but a friend of White's, "Peter Kurth, the American biographer" (p. 111). In fact, the singer at the start of the book is accompanied by street musicians, "sketchy chords on an accordion and the half-hearted strumming on a sadly out-of-tune guitar" (p. 12), while the singer near the end of the book sings "free of all accompaniment" (p. 112). "The instruments

may have been feeble” (p. 12), writes White of the accompanists to the first street singer, “but her voice rang off the old walls in the narrow rue des Lombards with a sharp, ricocheting force” (p. 12). White also is accompanied at first by a frail, “feeble” Hubert, though White’s writing voice is sharp and ricochets--returns and reverberates--it might be said, into print. Later in the book Hubert no longer accompanies White, yet White is alive still and writing, having sustained Hubert in the book’s pages. While “mourning impels the ego to give up the object by declaring the object to be dead and offering the ego an inducement of continuing to live,”⁹² in melancholia, when “the object can no longer exist in the external world, it will then exist internally, and that internalization will be a way to disavow the loss, to keep it at bay, to stay or postpone the recognition and suffering of loss.”⁹³ “[I]n our book,” White writes, he, Hubert and their basset hound Fred “remain an eternal trio” (p. 8).

In losing the other, the melancholic, rather than withdrawing “the libido from this object” and displacing it “on to a new one,” internalizes the lost object; in other words, in melancholia “the free libido was not displaced onto another object; it was withdrawn into the ego.”⁹⁴ Investment in the other is internalized rather than sundered by separation. This dynamic is what is expressed in White’s negotiated articulation in two languages: he writes in English but the text is riven with commentary in and slippages into the language of his dying lover. Melancholia here is exposed by sutures in the language of the text. But language also exposes melancholia in the queer AIDS texts when it is invested with talismanic power to protect against the loss of the other.

⁹²Freud, “Mourning and Melancholia,” p. 267.

⁹³Butler, *The Psychic Life of Power*, p. 134.

⁹⁴Freud, “Mourning and Melancholia,” pp. 257-258.

The Text as Talisman

Writing, or making art, can be a way of attempting to control what is uncontrollable, namely illness, or (here), death: "A compromise between illness and health, able neither to love nor to work, art then offers us a way of simply not-dying."⁹⁵ For example, the essay "White Glasses" is meant to be an obituary, but instead it celebrates Michael Lynch's life, as though writing (the writing of the obituary itself) can function to prevent a death. But in the meantime, writing his obituary, the author gets ill, so even if in some magical way the essay served to prolong Lynch's life, it is not a reliable mechanism for salutary preservation.

Some works of AIDS literature function as negotiations about what art is able to accomplish in the face of devastating loss. One critic comments that "[m]uch of the vehemence of AIDS rhetoric may be attributable to the belief in language's magic prophylactic powers,"⁹⁶ suggesting an investment in the possibility that words strongly expressed can magically ward off the ravages wrought by AIDS. Another critic disavows the disposition towards relying on literature to ward off loss: "Neither does testimony attempt to substitute words for persons; that would be mere fetishism."⁹⁷ But some works of AIDS literature, as I have suggested, do engage in a kind of fetishism, investing words with the talismanic power to sustain life. A fetish is a marker of what is gone but it is also a protection against loss: in the fetish "the horror of castration has set up a memorial to itself in the creation of this substitute....It

⁹⁵Claire Pajaczkowska, "Art as a Symptom of Not Dying," *New Formations*, No. 26, Autumn 1995, p. 88.

⁹⁶David Bergman, *Gaiety Transfigured: Gay Self-Representation in American Literature* (Madison: The University of Wisconsin Press, 1991), p. 123.

⁹⁷Timothy F. Murphy, "Testimony," in Timothy F. Murphy and Suzanne Poirier, eds., *Writing AIDS: Gay Literature, Language, and Analysis* (New York, Columbia University Press, 1993), p. 317.

remains a token of triumph over the threat of castration and a protection against it.”⁹⁸

One of the significant functions of the fetish is to act as a talisman against an unacceptable loss. Insofar as it stands as a substitute for the thing that one can’t bear to lose but has lost (or never had), it also serves precisely to deny the loss.

It has been noted that “[m]elancholy seems to harbor a revulsion against narrative.”⁹⁹ Although the explanation provided is that in melancholia “there is nothing more to say, or no point in trying to say it,”¹⁰⁰ what I find in these texts is not a dearth of words but a surfeit of language that refuses narrative. In the novel *The Art Lover*, which will serve here as my paradigmatic example of writing as talismanic fetish against loss in AIDS literature:

[t]he narration moves brokenly from speaker to speaker, sketching thoughts, dreams, memories. Newspaper clippings on various topics--star maps, artists’ lives--are patched in throughout, often as an ironic counterpoint. When the story draws to an end, characters from different imaginative levels seem to be melting into one another.¹⁰¹

While there is comfort in a seamless narrative, the queer texts are not seamless and do not offer or accept the possibility of comfort. It is said that *The Art Lover* “takes the incoherence of grief as a compositional principle.”¹⁰²

In *The Art Lover* the narrator, Caroline, struggles to find a mode of art--to come upon the words or images, or the right blend of words and images and styles of writing--that will resolve grief or make sense of loss. The formulation of the novel *The Art Lover* can be read as an attempt to use every kind of art and artfulness

⁹⁸Freud, “Fetishism,” p. 353. On this point see also Parveen Adams, “Of Female Bondage,” in Teresa Brennan, ed., *Between Feminism and Psychoanalysis* (London and New York: Routledge, 1989), pp. 254-255; and McClintock, p. 4.

⁹⁹Anita Sokolsky, “The Melancholy Persuasion,” in Maud Ellmann, ed., *Psychoanalytic Literary Criticism* (London and New York: Longman, 1994), p. 129.

¹⁰⁰Sokolsky, p. 129.

¹⁰¹William Ferguson, “Nowhere to Hide,” *New York Times Book Review*, June 24, 1990, p. 20.

¹⁰²Ferguson, p. 20.

available to try to affect the course of unbearable inevitable events: the novel employs conventional narrative that then splits off into various levels, in which one story turns out to be a story that another character is writing or telling, or a character from one level of narrative will appear in the dream of a character from another level, or very similar scenarios will play out on more than one level of narrative.

Additionally, the novel employs images interspersed throughout the text: for example, scraps of paper torn off signposts from the streets of Greenwich Village, New York; “sky maps” ripped from *The New York Times*; photographs of houses or graves that are mentioned in the story; and reproductions of the work of the artist Gary Falk. The novel, in its reliance on various media, aside from the conventional words and sentences and paragraphs that normally make up a novel, is an interrogation of the power of art and writing. Of a story about the painter Giotto drawing sheep when he was a boy, Caroline asks her father Max, “Is it because he loved his sheep?” “Yes, indeed,” Max replies. “And so that he could keep them? So they would not go away?” (p. 52). The novel itself works as an interrogation into the possibility of rendering individuals into art as a way of keeping them, of not letting them go, of resisting inevitability. This is what Caroline does with Steven, and with Max, and the character Carole Maso with the character Gary Falk (and therefore arguably the author Carole Maso with her friend, the artist Gary Falk): draws them into her narrative because she so loves them, so that she can keep them, so that they will not go away. This resistance to the inevitability of loss is what makes the novel melancholic.

Sometimes drawing on many genres and narrative forms can be seen as a frantic attempt to find something--anything--that will work, that will alleviate the

overwhelming pain of loss. If “melancholia tends towards a loss of words” because “no sign can express the loss,”¹⁰³ then Maso’s novel on the contrary invests in a surfeit of signs as a possible way to symbolize what is essentially inarticulable. Although melancholia is said to resist narrative, it is also said to be given to “garrulousness” and “pathological verbosity.”¹⁰⁴ *The Art Lover* is engaged in melancholia’s “discursive plenitude”¹⁰⁵ and melancholia’s need to “act out what needs to be elaborated in signs and symbols formed in response to the loss of the object.”¹⁰⁶

While the other texts I have examined in this chapter have been exemplary of the mechanisms of melancholia that I have tried to elucidate as functioning within the texts, Maso’s novel *The Art Lover* is less an example of any particular function of the writing of melancholia as an interrogation into these functions. Throughout the novel are inquiries into the power of writing to ward off loss--what in terms of melancholia would be the fetishization of writing to sustain the lost other and therefore to deny the loss.

One way the novel interrogates the power of writing to ward off loss is through the intermeshing of narrative levels, which serves partly as an interrogation of the “divinity” of art. Is it art that authenticates or distorts our experience of reality that is most effective in obviating loss? Another way is through the juxtaposition of representational forms, which recapitulates a kind of emotional flailing for some medium that will work to prevent loss, to deny loss, or at least to console. *The Art Lover* reads at first like an experimental novel with its interrupted narrative and

¹⁰³John Lechte, “Art, Love, and Melancholy in the Work of Julia Kristeva,” in John Fletcher and Andrew Benjamin, eds., *Abjection, Melancholia, and Love: The Work of Julia Kristeva* (London: Routledge, 1990), p. 34.

¹⁰⁴Schiesari, p. 48.

¹⁰⁵Schiesari, p. 49.

¹⁰⁶Lechte, p. 35.

evocations of what seems like extratextual material, such as photographs, art reproductions, and newspaper clippings. It functions however not as an experiment, but as a question. It seems to try everything out to see what will work. Rather the novel is a fabrication of an experiment. It is a lament of the conclusion it already knows: that writing does nothing but still one must write.

The Art Lover operates on at least three narrative levels, and all these levels overlap significantly. The narrative that opens the novel *The Art Lover* turns out to be a novel that another character, in the larger novel *The Art Lover*, is writing. The initial narrative seems to emerge into focus from a haze, as though it too is something real that must emerge, as a sculptor is said to bring the sculpture within the block out into the world. This device is interesting and strange because it seems to be the author who is straining to perceive what is occurring (already) in the narrative, as though she too, like the reader, does not know what will happen:

A man further back on the beach, now getting up, calls to her. He calls something out as if it were pure song. "The sun" I think is what he says. She turns. No. "Alison!" He is saying her name. "Alison" (p. 5).

And then the "author" pieces together who these people might be to each other:

Although there is only a slight physical resemblance, the man can only be her father. You can tell by the way he moves toward her (p. 5).

And further, "I know by the trees, the gentians at her feet, the quality of light, that it is spring" (p. 7). Then the next sentence is uttered not interpretively, as those previously, but with full authorial knowledge: "This is the Berkshires and spring comes slowly here" (p. 7).

These pieces of narrative that are hazy even to the "author" until she clarifies it all for the reader is a trick of fiction, for the author here is herself a fiction within the

novel. Even the pieces coming into clarity are pieces that she has created, not some reality that she is trying to make out in another world as though through a crystal ball. Normally, we expect at least the writer to know what is coming, to know who the characters are, to have some control over the narrative. This not knowing gives the effect of divination: "Seeing them this way from some distance," the narrator says of the family, "I can tell they are talking, but I can't make out what they say" (p. 7). And then the narrator has less than complete authorial knowledge, by referring to herself and by admitting she does not know what will happen to them, analyzing on top of that her inability to foresee:

I cannot guess yet how remote I, the onlooker, I the one who is telling their story, have become, how cautious. If there is a clue in this scene of something about to go awry, I do not see it. I overlook it. Or perhaps I prefer not to see it (p. 8).

We are reading not just a story, but a writer writing a story, so embedded does the author appear to be in the telling, and so overtly does the narrator take us through each scene. This is one of the ways that the writing life (the lived life) is made textual and the text is brought to life. Textuality expands to include what is outside fiction. For example, the first nonlinguistic image in the novel is an illustration that accompanies a reference in the text to "the enormous starburst in the arch over the farmhouse door" (p. 8). Then on the following page we have a photograph of this door, authenticating the scene, offering a kind of proof, or the beginning of a scrapbook to justify the narrative not as (or not only as) fiction but as reaching outside the text into an authentic memory.

These layers of narrative can read like an attempt to strike the appropriate formulation of words and expression that will coalesce in just such a way as to provide possible protection against loss. The novel consistently tries to pit art against

dissolution. When Caroline is in residence at an artists' colony, for example, she goes a year without hearing anything at all about AIDS:

The candlestick maker told me that his partner, the other candlestick maker, is in the hospital with AIDS. Acquired immune deficiency syndrome. "It's primarily a gay disease now. You get it," he said, "through the exchange of bodily fluids. Five thousand have already died, and no one has survived." Where have I been, I wonder?" (p. 34-35).

At the artist colony she could avoid death. Until she saw a headline of Rock Hudson, she did not know about AIDS: "At Cummington I kept dying at bay for an entire year...until you, Max" (p. 41). To be ensconced in art, it is suggested here, is a way to protect oneself from loss and death.

Insofar as the novel is a negotiation with the power of art to mark and to protect against dissolution, there are moments in the novel when the effort fails. Her friend Steven does die, whether he is the fictional Steven or the "less fictional" Gary. In the section where the protagonists are called Carole Maso and Gary Falk, the artist, the novel that Maso is writing, her first novel *Ghost Dance*, is so compelling, so beautiful, that it is making Gary's health deteriorate:

In April you read my book *Ghost Dance* in galleys. You understood it like no one else. You told Helen not to tell me, but you found the book so intense that you thought it was making you sicker (p. 202).

The layers of narrative suggest both a hierarchy of reality and a disintegrating of reality, that all of it is text. It also suggests that art does have great power to affect matters of life and death. In the section that can most readily be taken for nonfiction, when Maso uses her own name, Falk's name, and recognizable public details from her life, the reader is most challenged to accept the text still as fiction. There are clues in the book that suggest the novel is interrogating the acceptance of the very true-sounding episodes for truth, or as any more real or authentic than the very

dreamlike hazy fictional parts. In the novel, Max's students ask if he was the father in his daughter's book. "Artistic license, you told them. 'It's called taking liberties.' A pause. 'Fiction,' you said, 'have you heard of it?'" (p. 38).

It is interesting to note that the North Point Press edition of *The Art Lover* includes in the front matter of their books the following disclaimer: "This book is an invention, an act of the imagination, and in no way should be mistaken for reality, the place where much good invention originates." However on the back cover of the Ecco Press paperback edition of the novel, *The Art Lover* is lauded this way: "In writing of these combined sorrows, Maso breaks the fictive form, relating her own experience with a dear friend's death." So is it "true," this section, or is it a textual trompe l'oeil, such a convincing invention that we are tempted to take it for reality? That the novel confounds the reader's perception of what layer of fiction is the most authentic is part of the interrogation of how art and writing work to suspend loss. The interrogation is a self-conscious investment in melancholy.

Not only does Maso, by delineating levels of narrative dissolve all experience into textual narrative, she also embeds an analysis of her writing into the words. She writes, "Categorizing helps. Putting things in columns helps" (p. 39). In the opening novel there is discussion of the Philbricks, the fictional family's neighbors, and later that name appears on a gravestone in a photograph from the art community where Caroline is in residence. The next passage, after the photograph of the door, is titled, as though part of the text, "A Few of the Things I Know About You," and it is in the voice of the author, who will be Caroline, and the passage, as the passage's title, is directed to her father who has recently died. Though the passage's title is in the

present tense, the passage is a memory and eulogy, the kind of list of descriptions associated with loss, with a methodical recipe for grief, going over a life in bits of description and memory as though encouraging ourselves toward sadness: “You were elegant, graying, distinguished, with a slight paunch. You were cerebral, exacting, lively, passionate” (p. 9). In this passage, an ongoing conversation with the absent father and remembrance, she cites newspaper articles as examples that “[t]hings are not in our control,” a phrase repeated along with “[y]ou were not old” (p. 9).

Newspaper clippings do not yet appear in the narrative, but here she quotes whole passages of disaster or adventure from the newspaper: the launching of the doomed Space Shuttle *Discovery* from Cape Canaveral; the escape of Methyl isocyanate from a Union Carbide tank in Bhopal India, killing more than 2,000 people (p. 10). These “facts” offer stability in a world where one can be, after all, so easily bereft.

They also extend the list, beyond her personal loss, of those things over which one has no control. So she “places” the text in history more privately: “And now my father is dead...I have come back to his house to settle what can be settled. A townhouse on West Eleventh Street in Manhattan” (p. 10). Throughout the novel, speaking to Max, the narrator’s recently dead father, she tells him where she is, what time it is: “Max, it is 4:45 p.m. on October 18, 1985, and I am now sitting in the dark bar called the White Horse” (p. 99). “Max, it is December 18, 1985, and it is 2:15 p.m.” (p. 170). In Washington Square Park it is “1:15 p.m., March 11, 1986” (p. 210). It is a continued negotiation between the stability of the stable facts of life and the consolations of art.

The newspaper clippings and advertisements in *The Art Lover*, the precise description of the stores and streets of New York, and the “nonfiction” section can be read as attempts to document or authenticate the narrative, to give it some sturdy reality to make it stronger, more useful, more real and therefore more reliable (more like art):

I am a lover of detail, a marker--it's a way of keeping the world in place. One documents, makes lists to avoid becoming simply petals. I am like you, Max: a looker, an accountant, a record keeper, a creator of categories, a documenter. For evidence I rip flyers from telephone poles, save every scrap of paper I get. Listen carefully. Organize. Reorganize (p. 12).

But reality has not turned out, after all, to be very reliable, and the jumble of newspaper clippings, paintings, photographs, along with telephone messages from Jesus, only serve to make reality suspect and narrative promiscuous. Narrative--a good story--can be applied equally efficiently or inefficiently to truth or lies, fiction or nonfiction, documentation or recollection. The novel-within-the-novel, for example, is a construction of layers, but it also amplifies the confusion between what is reality and what is the real fiction, as though one layer of fiction is more real or authentic than another. Under a section titled “Candace’s Dream” is, without text, a work of art by Gary Falk (p. 64). Candace, in the novel-within-the-novel, is dreaming an image two layers of fiction out, of a work of art by Steven who, in another layer, turns out to be Gary. While this might be taken as a paradigm for how fiction writing, like dreams, utilizes the residue details of the life of the author, it also, in this case, challenges the authority of the narrator, as though the objects and details float about from story to story and can’t be controlled.

Maso’s use of newspaper clippings, articles from books, and so on seems like an anxious--indeed, hysterical--requirement to get everything down in whatever form is

available, to reach beyond any one particular genre, to find the mode of expression that will best articulate--and best ameliorate--the intolerable situation. But it is not a wild grasping at genre after all, but a careful attempt to document art and writing--to make it mean something and to infuse it with power. The novel is a long contemplation, as are many of the works discussed in this chapter, of the power of words, the power of writing or art to keep someone well or alive, and finally to keep oneself well and alive. In Guibert this is given a small analogy, when he is visiting a Japanese temple and must write down a wish on a small slip of paper so that the monks will pray for his wishes to come true (Guibert, pp. 109-110). His own writing, after all, is a long transcribed wish for survival, that in being written will warrant the notice of those with power to accommodate his wishes. The result is paradoxical: that writing and creativity have no such power to keep one alive, that one could not live without writing, and that, after all, one is kept alive in print, in the very words that despair of language's potency.

Can writing or art, this literature asks, keep control of what lives and dies? Can it modulate grief? Is it a consolation? Passages from *The Art Lover* ask these questions the most overtly, but these questions are threads throughout the writings. Can time be slowed or hastened? Can illness and loss be given meaning?

Writing too can keep the world at a distance. One uses "one" instead of "I." One does not look long enough, or one becomes frightened, fainthearted. One turns flesh too often into words on a page....The temptation is to make it beautiful or perfect or have it make sense. The temptation is to control things, to make something to help ease the difficulty (p. 16).

But Caroline wants not to turn Steven into art, not to make his life or his death

"manageable": "I flesh him out. I will not turn him into paint and canvas, where he'll be manageable. He won't allow it" (p. 142). But of course she does turn him into art,

into her novel. She tries to make him manageable, make the experience coherent, but only with an ostensibly incoherent novel. And recognizing this she apologizes:

“I’m sorry,” I tell him. “I’m here.” It’s something I learned from Max. To leave like this. How to make pictures of leaving in my head (p. 142).

Ultimately she cannot bear trying to make it manageable:

I am tired of things that divide, that change shape, that become anything other than themselves. I am tired not only of the sinister magic that changes normal cells into death cells, but of any magic, the cells in my brain that turn the homeless on the streets into pink and purple mountains, the cells that turn broken glass into ice. I am tired of any deception. The cells of my brain that bring you back. Max, I am sick of myself trying to give shape to all this sorrow, all this rage, all this loss--and failing (p. 148).

With the terrible illness of her friend her narrative omniscience, that can get even the dead, even Jesus--another occasional character in the novel--to speak, loses steam, loses any power:

Steven opens his eyes. He looks at them as they remove the red plastic bags that are full and replace them. He’s thinking, Oh, those cute orderlies, or, Didn’t I meet you once at the Palladium? or--I don’t know what he’s thinking (p. 149).

Words for her begin miserably to lose power. “It should be possible,” she utters, for the first of many repetitions, “to do something with words” (p. 149). And losing narrative power she turns the second-person narration on herself:

These things are true about yourself, Caroline:

Sometimes you need to sit in a cafe after a visit to the hospital. You like to watch the people around you, pretend it’s the whole world. You sit, even now, with a pen in your hand. You hold it like a paintbrush sometimes. Sometimes like a staff. Sometimes like a weapon. Now and then you still think of Maggie and Alison, of Candace and Henry.

You push your hair to one side of your head, capable of arranging, if nothing else, the way your hair falls.

...

Put the ashtray in the center of the table. The little vase with the flower and baby's breath slightly to the left. The sugar in its glass pot to the other side (p. 150).

Just when Caroline cannot bear the powerlessness of narration, her character Candace has a tantrum over it:

"I do not believe there are no solutions. I do not believe that we are doing all we can. I do not accept that we are expendable. I do not believe we are powerless.

"I know there are solutions."

She dips her hands into paint and leaves her fingerprints on the walls in every room of their apartment. "I was someone once," she says. "I was here" (p. 160).

Art, leaving fingerprints on the wall, this character suggests in this gesture, is a way of making something that will last.

Conclusion

In the queer AIDS texts I have been able to identify four textual strategies, which are each responses to, and interventions into, melancholia: incorporation, fetishism, the use of dialogic narrative to represent ambivalence and therefore to preserve the lost other, and the use of writing to create a talisman against loss and death.

These works of AIDS literature are responses to, and interventions into, melancholia. They are melancholic because they recognize that words, however well or strongly expressed, cannot in the end ward off death. Additionally, the queer AIDS texts are unable, or unwilling, to engage in the narrative order and closure that I have indicated in Chapter 2 can signal an attempt to exert control over the chaos of loss and the grief it induces. In Freud's characterization of the process of coping with loss, "grieving and mourning are completable tasks."¹⁰⁷ The work of mourning cannot be completed, or even begun, however, if the subject refuses to acknowledge the

¹⁰⁷Michael Moon, "Memorial Rags," p. 234

fundamental separateness between the surviving subject (the self) and the dying or already lost object (the other). The queer AIDS texts function as negotiations with language and writing as to whether they will serve as talismanic fetishes that will ward off death.

The white glasses of Sedgwick's essay function, for example, as a signifier that suggests the virus *can* be rendered in language. This suggests the possibility of an identification between subject and object (the author and he or she who is incorporated into a body of writing) that can sustain the self through sustaining the other. "The grieving that occurs in melancholy is...more primitive than what occurs in 'healthy' mourning, since what is at stake is nothing less than the constitution of boundaries between self and other."¹⁰⁸ Within the queer AIDS literature can be found an interrogation of the power of writing to mark and also to intervene in the course of unbearable deprivation. Can a specific arrangement of words, the right narrative, keep loss at bay?

In the interrogation of the power of art and literature to ward off death comes an understanding that while it cannot forestall death, one can refuse to engage in the process of relinquishing the lost other that will result in severed identification. The other dies, but still the self can refuse to let the other go. It is this refusal that characterizes melancholia. "Like the fetish, the affect of melancholia both affirms and denies loss"¹⁰⁹; in denying loss the fetish of writing acts as a talisman against loss, a paradox that allows for an acknowledgment of loss that will also erase the loss.

¹⁰⁸Santner, p. 3.

¹⁰⁹Schiesari, p. 47.

Chapter 5

Fictions of Witness

In the previous chapters of the thesis I have shown how gay AIDS fiction is characterized by efforts to work out a gay sexual identity through narrations of AIDS. In the queer AIDS literature the narrators were shown to be preoccupied not solely with sexual identity, but equally with issues of mortality, illness and health, and their lives as writers, often through the *lens* of sexual identity. In this chapter I examine AIDS fictions of witness, that is, narratives of an other who is ill with AIDS as witnessed by a narrator who is an “outsider” in some respect, most significantly someone who is not himself or herself infected with HIV. These narrators also differ from the other on what become in the course of some of the narratives the fundamental grounds of sexual identity.

All the texts I am considering in this thesis concern the relationship between self and other. In the gay and queer AIDS texts the person with AIDS is both self and other at the same time. In the context of the fictions of witness, the person with AIDS is other: “not me.” The narration is from the point of view of a witness, someone who is implicated and involved in neither the illness nor the identities associated with the contracting of that illness. The relationship represented here is between the central protagonist--the witness or caretaker--and the person with AIDS. I will examine in this chapter how a relational identity between the well narrator and the ill other is constructed within the fictions of witness.

Calling these texts fictions of witness is not to suggest that the gay and queer AIDS texts do not also stand as testimony to the era of AIDS. However, because the authors and narrators of the gay and queer AIDS texts are implicated and involved in

the experience of AIDS, those texts are not merely testimony but often recapitulations of the experience of AIDS for those who would already have some familiarity with the exigencies of living with the disease. The fictions of witness considered in this chapter serve as testimony for a mainstream audience, not for an implicated or involved audience; they are the link between AIDS and a distantly perceived population. Shoshana Felman explains it thus:

The specific task of the literary testimony is...to open up in that belated witness, which the reader now historically becomes, the imaginative capability of perceiving history--what is happening to others--*in one's own body*, with the power of sight (of insight) usually afforded only by one's own immediate physical involvement.¹

The fiction of witness, as I will explain further, is the medium through which a mainstream audience is meant to learn about and understand AIDS.

Shoshana Felman explains that "the process of...testimony [is] that of bearing witness to a crisis or a trauma."² She writes further that "[i]t has been suggested that testimony is the literary--or discursive--mode par excellence of our times, and that our era can precisely be defined as the age of testimony."³ Certainly the crisis of AIDS, and the accounts and memoirs that it has compelled, has contributed to ours being thought of as an "age of testimony." While there is a growing literature of testimony, or witness, written by gay men about their lovers dying from AIDS, most notably Paul Monette's *Borrowed Time*⁴ and, more recently, Mark Doty's *Heaven's Coast*,⁵ here I

¹ Shoshana Felman, "Camus' *The Plague*, or a Monument to Witnessing" in Shoshana Felman and Dori Laub, *Testimony: Crises of Witnessing in Literature, Psychoanalysis, and History* (New York and London: Routledge, 1992), p. 108; emphasis in the original.

² Felman, "Education and Crisis, Or the Vicissitudes of Teaching," in Felman and Laub, p. 1.

³ Felman, "Education and Crisis," p. 5.

⁴ Paul Monette, *Borrowed Time: An AIDS Memoir* (New York: Avon, 1988).

⁵ Mark Doty, *Heaven's Coast: A Memoir* (New York: HarperCollins, 1996). See also Fenton Johnson, *Geography of the Heart: A Memoir* (New York: Washington Square Press, 1996).

will concentrate on texts of witness that are told from the perspective of individuals not implicated in an identification with AIDS that has come to be inextricably associated with gay men. Further, I have chosen, despite the proliferation of nonfiction memoirs written by family members for ill or now dead loved ones, to concentrate on the *fiction* of witness, the texts that claim to fabricate a narrative of witness. In this case, fiction allows a scrutiny of the relationships of witnessing and caretaking in a literature that does not rely on the accuracy of events, but more on the authenticity of experience.

I am looking in this chapter at three kinds of texts of witness: fictions written from the perspective of a heterosexual male narrator about a gay male friend dying of AIDS, fictions written from the perspective of lesbian women whose narratives are characterized by an absorption in the gay male community and an involvement in the context of their particular world of illness and death, and fictions written in the domestic context of an American nuclear family.

It is only in this chapter that all the texts and all the authors under consideration are American. Just as the commemorative AIDS Quilt is fundamentally a text of witness that evokes a national (U.S.) identity and thereby facilitates the working out of national grief, as I will show, so do these specifically American fictions of witness represent interventions into the assumptions of American life and identity, specifically the institutions of the family, masculinity, and heterosexuality.

Louis Begley's novel, *As Max Saw It*⁶ and Dennis McFarland's short story, "Nothing to Ask For"⁷ are both narrated by heterosexual men who are witnesses, to a close male

⁶ Louis Begley, *As Max Saw It* (New York: Knopf, 1994); subsequent page references will be made parenthetically within the text.

⁷ Dennis McFarland, "Nothing to Ask For" in Sharon Oard Warner, ed., *The Way We Write Now: Short Stories from the AIDS Crisis* (New York: Citadel Press, 1995). The story was first published in *The New Yorker*, September 25, 1989; subsequent

friend dying of AIDS. In Begley's novel, Max, on a holiday in Italy, meets up with Charlie, an old Harvard acquaintance, who is now gay and squiring around his young paramour, Toby. They meet again in China--where Max recognizes fond avuncular feelings for Toby--and later become neighbors when Max comes into an inheritance and buys a country home next to Charlie's in the Berkshires in Western Massachusetts. At the end of the short novel, Toby is increasingly ill with what is evidently AIDS and finally dies, all under Max's watchful gaze. In "Nothing to Ask For," Dan cares for his old friend Mack who is dying of AIDS.

Alice Elliott Dark's short story, "In the Gloaming,"⁸ Alice Hoffman's novel, *At Risk*,⁹ and Rebecca Brown's novel, *The Gifts of the Body*¹⁰ all focus on women who care for another who is ill with AIDS. "In the Gloaming" is a story of a mother's increased intimacy with her son who has come home to die. Hoffman's novel tells of a family in which the eldest child of two, an eleven-year-old girl, becomes sick. Finally, Brown's fiction describes interventions of a woman--a professional home health care worker--with others who are ill with AIDS, both men and women. The two short stories that I am examining, as well as a portion of Brown's novel, are collected in the anthology *The Way We Write Now: Short Stories from the AIDS Crisis*. I will therefore consider the foreword and introduction to this anthology as indicative of how it is thought "we write now" from the perspective of an anthology's compilers who seem to intend their collection for a reading audience constructed as

page references will be made parenthetically within the text.

⁸ Alice Elliott Dark, "In the Gloaming," in Warner. The story was first published in *The New Yorker*, May 3, 1993; subsequent page references will be made parenthetically within the text.

⁹ Alice Hoffman, *At Risk* (New York: Putnam, 1988); subsequent page references will be made parenthetically within the text.

¹⁰ Rebecca Brown, *The Gifts of the Body* (New York: HarperCollins, 1994); subsequent page references will be made parenthetically within the text.

mainstream. In this context, another AIDS text of witness that I will consider in this chapter is the NAMES Project AIDS Memorial Quilt. Initially a memorial text of deaths produced by and largely intended for a gay male audience, the Quilt has quickly become a more popular forum for expressing and working out grief for Americans whose identifications (or lack of them) place them outside the more specific groups initially conceived to be affected by AIDS.

The written texts discussed in this chapter have as their closest counterpart in literary style and narrative form the gay AIDS texts discussed in Chapter 2. The texts are uninterrupted fictions; that is, they do not call attention to themselves as literature. They are seamless realist narratives that expect to hook the reader into the story and weave them up into the fabric of the tale's progression. They are not hybrid and not self-conscious about being literature or specifically fiction.

In the analysis of the AIDS fictions of witness, the activity of watching within the narrative is crucial for working out strategies of narration. Watching in these texts is the paradigm for the relationship between self and other. Through the process of writing about AIDS the narrative perspective is used to work out sexual identity. In the case of the heterosexual male narrators, for example, the activity of watching acts to reinforce the boundaries of an ambivalent heterosexual identity. Watching in this case is crucial for working out a differentiated sexual identity. The watching involved in these texts is not neutral nor is it unambivalent. How this is so in the various categories of texts is what will be explored in the analysis that follows.

The texts I am considering in this chapter are different from the others considered so far because they work out an identity based on differentiation and watching rather

than the inclusion and participation that are assumed from a gay male perspective or from a queer perspective. These are narrators who do not know quite what their relationship is to the sick other (though there may be roles already prescribed for them) and seek to determine this by: (a) either differentiating themselves from or aligning themselves with the ill other, therefore sometimes reconfiguring their prescribed roles, and (b) contributing to--and determining a relationship to--a public discourse of grief around AIDS and loss and mutable social identity.

While I have suggested in the introduction to the thesis that there exists for gay-identified men a prior identification with death and loss and also therefore with mourning, there is no such prior identification for a mainstream audience on the basis of their social or sexual identities. As these narrators present themselves as not implicated in the illness, the identity, or the mortality of those who are sick (there is no sense that they also could succumb), they are not candidates for melancholia, as are the narrators of the queer AIDS literature, nor candidates for the kind of mourning I have ascribed to the figures in the gay AIDS fiction. The figures in the fictions of witness grieve; they seem to want to engage in the work of mourning, but they do not engage in the melancholic pathology that stems from terror and acknowledgment of one's own implicated state in illness and mortality. They are only ever witnesses--caretaking witnesses--but not implicated witnesses. The process of melancholia, for example, requires identification; melancholia emerges in part from "an *identification* of the ego with the abandoned object."¹¹ There is often in the heterosexual texts a willful failure to identify with the lost loved one. The fictions of witness, I will argue, engage in a more public mourning, better characterized as grief,

¹¹Sigmund Freud, "Mourning and Melancholia" (1917) in Angela Richards, ed., James Strachey, trans., *On Metapsychology: The Theory of Psychoanalysis*, The Penguin Freud Library, Vol. 11 (London: Penguin, 1991), p. 258; emphasis in the original.

to distinguish it from the personal mourning experienced by the individual, or the more intensive personal experience of melancholia. Public grief is facilitated by texts that are available to, and intended for, a wider audience than those texts directed to a more specific audience of implicated individuals. For example, public memorials facilitate public grief. The NAMES Project AIDS Memorial Quilt is a memorial that facilitates public grief, and so are some of these texts of witness that are most readily available to a readership that perhaps has not experienced loss or the fear of loss in AIDS on the level of those who are more implicated, like gay men and also, to some extent, as we shall see, lesbians. The texts are public forums for grief in the way they participate in working out for their particular reading audience the feelings of fear and loss associated with AIDS and their implications for working through issues of sexual identity and untimely death.

The narrators of these texts of witness, significantly, have no necessary prior relationship with mourning that is based on who they are or what behaviors they engage in. Part of why they are not implicated is that they are not--or do not identify as--gay. It is not only the illness that acts as a barrier but sexual identity. It is not just that these characters are not ill, but that they do not perceive themselves as susceptible to being ill if they are not gay. Though the books do not foreground sexual identity, it turns out to be an important distinguishing identity in many of these texts.

This is to say not only that the narrators of the fictions of witness are not ill or infected themselves with HIV or AIDS, but also that they are not likely to fear or assume that they will become infected or ill with HIV because of, or in a way that is determined by, their sexual or social identities. Through an association with AIDS, gay men are automatically implicated in the discourse of AIDS in a way that

individuals of most other sexual identities are not, *even if they have AIDS*. The witnesses in this chapter are those not implicated in the discourse of AIDS as a result of their sexual identity, in the way, for example, that all gay men are implicated. Indeed, not all of these narrators--particularly the heterosexual men--need to think about having a sexual identity at all. As Jeffrey Weeks has written:

Heterosexuality, thrown into sharp relief by its deviant “other,” homosexuality, remains the norm of our culture, and the unspoken taken-for-granted of almost all our discussions of sexuality.¹²

Because heterosexuality in our culture is “compulsory,” it needn’t be thought of as a particular sexuality at all.¹³ And in terms of these fictions, because heterosexuality has no direct association with HIV and AIDS, there is no reason for the narrators to consider having a sexuality in the context of illness or potential infection.

Bearing Witness

Literary “memorials” encourage a public and collective working through of grief as opposed to the more private processes of working through mourning found in the gay and queer texts. One reason for this distinction is that gay and queer identities are themselves still not sufficiently public to warrant a more widely public working through. While the term queer is, as I have suggested, even more inclusive of disparate identities than is the term gay, it is yet more private, as the queer texts have revealed ultimately an introspective unraveling of the meanings of illness, mortality, and public notoriety. While gay and queer AIDS texts stand as important memorials to a certain time of the epidemic, they are formulated not as witnessed accounts,

¹²Jeffrey Weeks, in Elizabeth Wright, ed., *Feminism and Psychoanalysis: A Critical Dictionary* (Cambridge, MA and Oxford: Blackwell, 1992), p. 154.

¹³See Adrienne Rich, “Compulsory Heterosexuality and Lesbian Existence,” in Henry Abelove, Michèle Aina Barale, and David M. Halperin, eds., *The Lesbian and Gay Studies Reader* (New York and London: Routledge, 1993), pp. 227-254.

because, as I have shown, the authors and narrators are so acutely implicated in the exigencies of illness and stigma associated with the illness (an implied deviant sexuality, or other socially unacceptable behavior). They cannot witness from a distance in the same way, because they do not have the luxury of distance.

Shoshana Felman writes of the novel *The Plague* that “Camus’ choice of the physician as the privileged narrator and the designated witness might suggest that the capacity to witness and the act of bearing witness in themselves embody some remedial quality and belong already, in obscure ways, to the healing process.”¹⁴ Bearing witness implies a greater involvement than that of only watching or observing. James Baldwin, a writer characterized, by himself and others, as one who bears witness, describes the difference thus: “An observer has no passion,” Baldwin says; to witness something “doesn’t mean I saw it. It means that I was there.” He gives the example: “I don’t have to observe the life and death of Martin Luther King. I am a witness to it.”¹⁵ To bear witness, he suggests, is both to attend and also to contribute to the residue of events: “I have to do what I can do and bear witness to something that has to be there when the battle is over.”¹⁶ To bear witness effectively is to “think yourself beyond the details of the day of disaster, which exists daily, then react again to your own reaction and try to find a way to engrave it in stone, to make certain that it will not be forgotten.”¹⁷

Though Gregory Woods comments that to “write about AIDS is largely a question of bearing witness,”¹⁸ there are varying levels of involvement in witnessing.

¹⁴Felman, “Education and Crisis,” p. 4.

¹⁵James Baldwin, in Fred L. Standley and Louis H. Pratt, eds., *Conversations with James Baldwin* (Jackson and London: University Press of Mississippi, 1989), p. 92.

¹⁶Baldwin, p. 129.

¹⁷Baldwin, p. 200.

¹⁸Gregory Woods, *This is No Book: A Gay Reader* (Nottingham: Mushroom Publications, 1994), p. 25.

To bear witness is to be *implicated* in the course of events, part of its outcome and its telling. I use the term implication, and sometimes *involvement*, to distinguish those who bear witness in the way I describe from the more distant and uninvolved, if not necessarily casual, observer.

It is not only that these texts of witness are more “public” than the gay AIDS fiction and the queer AIDS literature but that they may appeal to a different or wider audience. This is made evident not by the publishing status of the books--as nearly all the books considered in this thesis are produced by major publishers--but by marketing and more significantly by who is likely to be interested in such literature. While gay publishing has grown enormously in the last ten to fifteen years, it has grown largely within the gay reading community--marked in the U.S. by a proliferation of gay and lesbian bookstores and an expansion of titles available to a gay reading public--and it has not been until recently that more mainstream readers have picked up gay-themed books.¹⁹

These texts rely on a more public form of mourning, and in this way serve a wider cultural function. The gay AIDS fiction served to both reflect and produce a gay subject in the age of AIDS. The texts of witness create a cultural understanding and memory of AIDS and its cultural productions. It is by their leakage outside the boundaries of gay identity into the mainstream (or into another marginal identity, in the case of the lesbian texts) that the fictions of witness indeed show best the greater cultural meaning of AIDS as a gay-associated disease and the anxieties and resistant

¹⁹In 1992 there began to be an awareness that there was a growing mainstream audience for gay and lesbian books. See Esther B. Fein, “Big Publishers Profit as Gay Literature Thrives,” *The New York Times*, July 6, 1992, p. D1, and Bob Summer, “A Niche Market Comes of Age,” *Publishers Weekly*, June 29, 1992, pp. 36-40. Before that it is assumed that the “boom” in gay and lesbian publishing was confined to a gay and lesbian reading audience.

identifications of those outside the borders of who is thought to be susceptible to infection. As Cindy Patton has noted, it is those who are considered at risk--gays and drug users--who are seen as *responsible* for knowing about the transmission of HIV and those in the mainstream--primarily heterosexuals--who are assumed to be *entitled* to know.²⁰ It could even be said, with Thomas Yingling, that these books serve the purpose of knowing “what homosexuality looks like in order to avoid its multiple contagions.”²¹ In other words, the fictions of witness, particularly those with heterosexual male narrators, require a fixed definition of homosexuality and illness, for the narrators to know that they themselves are not gay and not therefore susceptible to infection. There is a parallel ideology suggested in these narratives that it is incumbent on those who are implicated in the discourse and crisis of AIDS to have a sexual and social identity and not necessary for those who are not implicated.

AIDS Fiction's Shifting Audience

The short story anthology, *The Way We Write Now*, in which a number of the texts I am examining in this chapter are published (or excerpted), is one of the first literature anthologies to concentrate its selection on AIDS stories. Prior to the appearance of this anthology, one was more likely to look for short stories that addressed AIDS in anthologies of gay writing.²² That this anthology does not include exclusively gay male perspectives on AIDS points to an expectation that the boundaries of the

²⁰See Cindy Patton, *Inventing AIDS* (New York and London: Routledge, 1990), p. 103.

²¹Thomas E. Yingling, *AIDS and the National Body*, Robyn Wiegman, ed. (Durham and London: Duke University Press, 1997), p. 59.

²²For example, the Dennis McFarland short story that I consider in this chapter, though authored by and narrated by a heterosexual man, was first anthologized in David Leavitt and Mark Mitchell, eds., *The Penguin Book of Gay Short Stories* (London: Viking, 1994), pp. 466-480.

audience who might be interested in AIDS fiction have broadened and also an objective to reflect the spectrum of writers and subject matter that includes but also goes beyond an exclusively gay male perspective. That many of them appeared originally in *The New Yorker*--a magazine that caters to a generally wealthy and intellectual and urban(e) readership--indicates that the original audiences for these stories was not exclusively gay but still were not the "general public."

AIDS fiction has thus moved from addressing and including a small particular audience to an expanded sensibility that is more mainstream. In fact, "Susan Sontag's 1986 short story 'The Way We Live Now'....was the first fiction about AIDS to appear in the *New Yorker* magazine and, as such, [was] something of a landmark in seeming to signal the literary establishment's endorsement of AIDS as an acceptable subject."²³ In the case of AIDS fiction, a mainstream audience partly suggests a heterosexual, white one, but also, and more importantly, it suggests the audience for whom AIDS was/is presumed to be (and was/is) a new experience. The anthology, in other words, was intended for those whom AIDS is not a familiar way of life, the way it is presumed to be for gay men.

In the foreword to this anthology, Abraham Verghese writes that "AIDS is more similar to ordinary life than it is different,"²⁴ announcing the subsequent literature as appealing to and appropriate for those who live "ordinary lives." If "[p]eople with HIV infection, shortly after they learn of their condition...feel an urgency to come to terms with their lives, to understand the meaning of why they are on earth, to try to put a value on the friends, relatives, and even the material goods in

²³Joseph Cady, "Teaching about AIDS through Literature in a Medical School Curriculum," in Judith Laurence Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* (Chicago: University of Illinois Press, 1993), pp. 236-237.

²⁴Abraham Verghese, foreword, in Warner, p. xi.

their lives”²⁵ then “anyone” would find stimulation in and connection to these narratives--stories that will link a general readership to what is crucial about all of life. The idea expressed in the foreword, and subsequently in the introduction, is that these short stories serve as pedagogical texts; the general reader will learn something from them about life. They are implicitly addressed to a general readership, and not to someone, infected himself or herself, who would not need to *learn* these things about life, being (Verghese characterizes himself as their student) the already implicated instructors. So literature here becomes a lesson about life, a lesson in the form of stories that “everyone” has something to learn from (even if we learn from them, as he rationalizes, “perversely”):

Perhaps this then is the lesson of AIDS, the lesson that the writers in this volume have extracted--that these stories are not about the bizarre, they are not about *other* lives; instead, these are stories about all our lives, stories that may teach us indirectly--even perversely at times--just what is of value in the short time we have on this world.²⁶

One wonders who is learning perversely (or teaching perversely); is it the implied general readership (akin to the “general population”) and not the gay readership (who presumably might already know about at least the gay stories collected here)? There is the idea here, again, that gay people have nothing new to learn about AIDS, there is nothing new anyone can tell them about living and dying with AIDS, but it is the uninitiated who might have something to learn, even if they must learn it perversely.

These stories, the editor then suggests in the introduction, are meant to act as records of witness: “the stories themselves reflect the changes our culture has witnessed in those years.”²⁷ “Most of us,” Warner writes, “knew little about AIDS

²⁵Verghese, p. xii.

²⁶Verghese, p. xiii; emphasis in the original.

²⁷Warner, p. xviii.

when ‘The Way We Live Now’ was first published,”²⁸ implying here that “us” is a general readership that does not include gay men (there are few gay men in America who by November 1986, when the Sontag story was published in *The New Yorker*, did not know a great deal more about AIDS than the implied “us” who “knew little about AIDS”). This passage further situates the anticipated readership for this volume as an “uninitiated” general readership, a readership perhaps, that reaches beyond not only an audience of gay men, but beyond the cosmopolitan audience of *The New Yorker*.

At the end of the introduction Warner explains the use (the “power”) of such stories: “these stories do grant us...the power to enter the lives of others.” The stories afford the anthology’s readers “the power of understanding.”²⁹ So these stories, which do include some gay stories--but here packaged for a more general (non-gay) audience, unlike the gay AIDS fiction intended for a more substantially gay audience (sometimes the same stories in a different context)--are meant to sow compassion and understanding, rather than a formulation of an identity and a discursive participation through the processes of grief.

Shoshana Felman suggests that “literature is the *alignment between witnesses*.”³⁰ Gay AIDS fiction on its own, for gay readers, participates in the discourse, not of “the way we live now,” but what it means to be gay now, with the identity’s attendant mourning and history of sex and loss. The mainstream stories and the anthology meant for a mainstream audience offer a way in to a world that has already its own systems of signification; the gay stories read by a gay reading audience offer another map of the terrain for those who are already engaged in that system and want a chance to reflect or extend a familiar experience or sensibility.

²⁸Warner, p. xviii.

²⁹Warner, p. xxiv.

³⁰Felman, “Education and Crisis,” p. 2; emphasis in the original.

Another way to put this is that the same gay stories in the context of a gay readership are more private, relying on icons and images that have become familiar to an audience with a legacy of reading AIDS fiction; in a mainstream context the stories become public (the same codes or images will signify differently). The function of the fictions of witness is that they constitute a public arena for working out grief and cultural identity.

This is significant for answering the question, “for whom is AIDS and its attendant experience of loss and grief a new experience?” The answer has changed as the historical narrative in which AIDS is written as gay also changes. Texts of AIDS fiction and, as I will show, the AIDS Quilt, have shifted over the historical period since the advent of AIDS, for an audience made up of the “general population,” from being utterly foreign to becoming pedagogically instructive to becoming inclusive of those outside of the traditional AIDS groups. It is not that those who have AIDS are no longer the “marginalised or execrated--gay men, intravenous drug users, people of colour, the poor”³¹--but that they are at the same time beginning to be recognized as not completely other: they are family or best friend, one whom one is obliged to care for, to watch.

AIDS Fiction as Pedagogical

When AIDS fiction is made available to an audience that is perceived to be one for whom AIDS is a new experience, the fiction will be assumed to be to some extent pedagogical, and will be scrutinized for its pedagogy and its capacity to reassure its readers. The existing critical literature on some of the fictions of witness has

³¹Jeffrey Weeks, “Post-modern AIDS?” in Tessa Boffin and Sunil Gupta, eds., *Ecstatic Antibodies: Resisting the AIDS Mythology* (London: Rivers Oram Press, 1990), p. 133.

considered their position not as literature so much as pedagogic texts for the uninformed reader.³² One of these critics comments bluntly that “[a]lmost all AIDS literature includes facts about the disease, for its purpose is to educate as well as entertain the public.”³³

A novel under consideration in this chapter is Alice Hoffman’s *At Risk*, published in 1988, an early mainstream fiction about AIDS. At the time of the novel’s publication Hoffman was already an author with a substantial following. With six novels already published, Hoffman included AIDS into the sphere that she was known for writing about: the suburban American family. Hoffman’s book was “one of the earliest novels about AIDS to be presented by a major American publishing house”³⁴ and “the only one to make the best-seller list.”³⁵ By 1994 she had “10 books, all still in print” and had “sold millions of copies of her books.”³⁶ The literary critic Judith Laurence Pastore assesses Hoffman’s novel for how effectively it sows compassion for all people with AIDS (her measure of value for a work of AIDS

³²See, for example, Steven F. Kruger, *AIDS Narratives: Gender and Sexuality, Fiction and Science* (New York and London: Garland Publishing, 1996); and Pastore. It is interesting in this light to note how many articles there are in the so far relatively few available critical collections on AIDS literature, on the teaching of AIDS literature. See for example Annie Dawid, “The Way We Teach Now: Three Approaches to AIDS Literature,” in Emmanuel S. Nelson, ed., *AIDS: The Literary Response* (Ontario and New York: Twayne Publishers, 1992), pp. 197-203; Peter M. Bowen, “AIDS 101,” in Timothy F. Murphy and Suzanne Poirier, eds., *Writing AIDS: Gay Literature, Language, and Analysis* (New York: Columbia University Press, 1993), pp. 140-160; Laurel Brodsley, “Teaching About AIDS and Plagues: A Reading List from the Humanities,” in Pastore, pp. 197-217; Sandra W. Stephan, “Literary AIDS in the Composition Class: Teaching Strategies,” in Pastore, pp. 218-232; and Joseph Cady, “Teaching about AIDS through Literature in a Medical School Curriculum,” in Pastore, pp. 233-248.

³³Brodsley, p. 214.

³⁴Kruger, p. 125.

³⁵Judith Laurence Pastore, “Suburban AIDS: Alice Hoffman’s *At Risk*,” in Nelson, p. 39.

³⁶Ruth Reichl, “A Writer Set Free by Magic: At Home with Alice Hoffman,” *The New York Times*, February 10, 1994, pp. C1 and C10.

literature). One way she measures this is by how well it teaches about AIDS to those who don't know much about AIDS.³⁷ Once a work of AIDS fiction reaches a mainstream audience it is assumed to become, necessarily, a pedagogical text. The critic Joseph Cady has written that *At Risk* can be seen to function as

a bridging work, an attempt to make AIDS less of a "foreign" reality for mainstream readers by showing that it can affect them as well as the minority groups more popularly associated with the disease.³⁸

It is as though fiction is the only exposure to AIDS this audience is assumed ever to have, and so the book assumes the imperative to teach them as it entertains them. In fact, however, Cady points out that "the amount of popular attention given to *At Risk* at its publication seems ironic confirmation of the book's relative safety for general readers."³⁹ The AIDS text directed toward an imagined mainstream readership has the dual role of edification and pacification.

Pastore has asserted elsewhere--echoing the sentiments of others--that AIDS literature has a responsibility; indeed, she assumes this by weeding out of her bibliography of AIDS literature any work that does not "treat...AIDS extensively enough and with enough sympathy and seriousness to make it helpful in combating the mistruths about the disease and creating more compassion for those affected by it."⁴⁰ This is a strict pedagogical burden to place on literature. But as long as mainstream AIDS fiction is perceived at least in part to serve pedagogical needs, then it is interesting to analyze what is being conveyed to the readers--the "students"--of these fictions.

³⁷Lamenting that there is likely to be few other mainstream works of fiction that "will appear in time to stem the crisis," Pastore figures that "probably, television and music will be the major popular forms of educating the audiences that the middle-class novel has traditionally not reached." Pastore, p. 49.

³⁸Cady, p. 239.

³⁹Cady, p. 239.

⁴⁰Judith Laurence Pastore, "Annotated Bibliography," in Pastore, p. 249.

As far as representation in the critical literature is concerned, then, the texts under discussion here are viewed as vehicles for pedagogy. In what follows, I want however to say something different about them, namely to examine how they construct the identity of the narrator, particularly in the heterosexual AIDS fictions of witness, and not the characters suffering from AIDS, as the ostensible caretaking attitude of the text proposes to do, and how in many instances they act as stand-ins for a reading audience.

In the case of the heterosexual male narrators and the member-of-family perspectives, I am looking at identities that do not normally need to be thought of in terms of a differentiated identity. The heterosexual AIDS fictions of witness, like the gay AIDS fiction, seem to be working out a sexual identity on behalf of a reading audience: in the case of the gay AIDS fiction to determine what it means “to be gay now,” and in the case of the heterosexual AIDS fictions of witness to reinforce for a mainstream readership a heterosexual identity that will provide the narrator and the reader with some security about their safety with regard to HIV and AIDS--a security that is based on their immune-privileged sexual identity. What is different about these texts is that they are not addressed to gay men in the first instance. They assume a different readership than most AIDS stories. Although none of the narratives examined in this chapter are told from the perspective of gay men, nearly all the stories involve gay men and are always told, even if unconsciously, in regard to a gay male identity.

How this plays out will be attended to after an exploration of how fictions of witness as a genre represent a move away from an AIDS literature whose realm is primarily that of gay men to one that is more mainstream. In that context, I want to

turn first to a text of witness that may at first seem a surprising choice for a literary study, namely the NAMES Project AIDS Memorial Quilt.

The Quilt

The literary fictions of witnessing and caretaking we are considering here are not unlike another text of witness: the NAMES Project AIDS Memorial Quilt. The Quilt “consists of an ever-growing number of three-by-six-foot panels, each of which memorializes an individual who died from AIDS.”⁴¹ “The NAMES Project was formally organized on 21 June 1987 and went public only a week later when its first forty panels were displayed in San Francisco’s Lesbian and Gay Freedom Day Parade.”⁴² The Quilt was displayed on the Mall in Washington, D.C. for the first time in October 1987 in conjunction with the National March for Lesbian and Gay Rights. It has been displayed in Washington, D.C. five times now, most recently in October 1996, when it was twenty-five times larger than when originally displayed there in 1987.⁴³

There are some significant and obvious differences, of course, between the text of the quilt and literature texts: the reliance of one text on physical materials like cloth, and the others on the distinct materiality of language: the fact that one is authorless, or many-authored, and the others generated each by a single author. And while the text of the quilt can be said to be a narration of deaths from AIDS, the narration does not unfold as a narrative progression in which one event follows

⁴¹Marita Sturken, *Tangled Memories: The Vietnam War, The AIDS Epidemic, and the Politics of Remembering* (Berkeley and London: University of California Press, 1997), p. 183.

⁴²Peter S. Hawkins, “Naming Names: The Art of Memory and the NAMES Project AIDS Quilt,” *Critical Inquiry*, Vol. 19, Summer 1993, p. 758.

⁴³Anthony Turney, executive director of the NAMES Project, fundraising letter, undated.

another in time.⁴⁴ One point of similarity is that both kinds of texts--the Quilt and fictions of witness--attempt to occupy and secure a place of memory. They act as cultural artifacts that claim to "record" and "remember" the facts of an international tragedy and, most apparently, measure and represent the processes of mourning experienced by a public that encompasses more people than only those who are ill and dying.

While the Quilt is the only nonliterary text considered in this thesis, it takes its place among literature for the following reasons. Since the advent of semiotics in Cultural Studies and increasingly in literary studies, it is not unusual to look upon nonliterary matter as texts that can be studied as texts. Film is an obvious example, but landscapes, furniture, and fashion have also been regarded as texts to be analyzed. Indeed, it has already been made clear in playful titles of critical essays that the Quilt is both textile and text.⁴⁵ In these ways the Quilt has also already been understood to be a text among literary texts by critics of literature and by its inclusion in studies that concentrate on the literature of AIDS.

Tim Dean also understands the quilt manifestly as a text in this way. He argues that as "textile, the Memorial Quilt is also text."⁴⁶ The way he manages to assert this is by identifying a metonymic chain that begins with the quilt and ends with a text that "functions testimonially":

When it was...displayed in Washington, D.C., in October 1989, in view of the White House and the Capitol Building, the quilt covered the full fourteen acres of the Ellipse and comprised almost eleven thousand

⁴⁴Whenever the Quilt is displayed it is accompanied by the recitation of the names represented in the panels of the quilt, which, though the recitation constitutes a verbal accompaniment to the "unfolding" of the text, does not constitute narration.

⁴⁵See, for example, Judy Elsley, "The Rhetoric of the NAMES Project AIDS Quilt: Reading the Text(ile)," in Nelson; and Richard Mohr, "Text(ile): Reading the NAMES Project AIDS Quilt," *Gay Ideas* (Boston: Beacon, 1992).

⁴⁶Tim Dean, "The Psychoanalysis of AIDS," *October*, Vol. 63, Winter 1993, p. 99.

panels--a metonymic pile of dead bodies arranged outside the metonymic body of the president....The signifying structure of the quilt is thus ordered to the metonymic logic of substitution: panel for grave...grave for body...and the linked metaphors of quilt for shroud [and] quilt for page. It is by this structural series of metonymic substitutions that the bodies of the dead are textually inscribed.⁴⁷

Additionally, at displays of the quilt there are always empty panels at its center; a “blank ‘page’” on which visitors are encouraged to inscribe what they wish “and thereafter have that message on record.”⁴⁸

Because some of the fictions of witness I am concentrating on in this chapter address a broader and more general audience than the others considered in the thesis, they serve as the junction at which personal mourning and melancholia meet cultural memory. In other words, these texts, not unlike the Quilt, serve as a collective focus for mourning. They create a context for grief outside of the “traditional” AIDS communities.

If “[m]emory is articulated through processes of representation,”⁴⁹ then:

the AIDS Memorial Quilt--a collection of quilt panels, each bearing the name of someone who has died of AIDS--is both a device through which personal memories are shared and an object seen by its makers to have cultural meaning.⁵⁰

The literature of witness, like the Quilt, is also a part of a “collective national witnessing.”⁵¹ This is partly made clear by the audiences that it addresses and the audiences that it anticipates. That is, both the Quilt and the literature of witness in large part anticipate and address mainstream audiences. The Quilt, most conspicuously by its display in the capital city of the United States, is a cultural

⁴⁷Dean, p. 99.

⁴⁸Hawkins, p. 760.

⁴⁹Sturken, p. 9.

⁵⁰Sturken, p. 3.

⁵¹Sturken, p. 25.

intervention into what is perceived as Americanness and into American cultural memory. Though the “quilt has been exhibited throughout the world and includes...panels from twenty-nine countries,”⁵² it remains profoundly an American artifact. “American national identity is at the center of its discourse.”⁵³ Though “[q]uiling has multicultural roots in Africa, Europe, India, China, and other places throughout the world,” the AIDS quilt is pointedly adopted from the folklore of American quilting. It also is a counterpoint to the history of the folklore of the American quilt: “The family quilt connotes continuity; AIDS creates disruption and broken lineage.”⁵⁴ The Quilt intervenes in Americanness, then, in a way similar to that in which AIDS has intervened. Both disrupt the family, for example, and also the strong sense of division between what is foreign and what is native. Founder of the NAMES Project Cleve Jones has said: “In the first brochure we wrote, we deliberately used the word ‘American’ in every paragraph. We wanted to apply a uniquely American concept to this disease that everyone wanted to see as foreign.”⁵⁵

The unfolding history of the Quilt parallels the development of AIDS literature from one that was almost exclusively gay to one that includes many mainstream voices. When the “Quilt was displayed for the first time...[i]t contained 1,920 panels, most sewn with the names of young gay men.”⁵⁶ And then the Quilt expanded; it now contains nearly 50,000 panels:

⁵²Sturken, p. 183.

⁵³Hawkins, p. 777.

⁵⁴Sturken, p. 192.

⁵⁵Quoted in Paul David Wadler, “Internal Strategies, Community Responses,” *Gay Community News*, December 4-10, 1988, cited in Sturken, p. 216.

⁵⁶Cleve Jones, Introduction, in Joe Brown, ed., *A Promise to Remember: The Names Project Book of Letters* (New York: Avon Books, 1992), p. vi.

As the epidemic has grown and changed, so has the Quilt grown and changed. The early names, those of young gay men, have been joined by ever-increasing numbers of women and children.⁵⁷

The Quilt is an unusual and unique memorial because it did indeed start out as a locus and nexus of mourning primarily for gay men and lesbians. Henry Abelove argues that the quilt is in its conception aesthetically and ideologically gay and lesbian in orientation. Why, he asks rhetorically, “isn’t the favored memorial something more usual--a statue in a park or a city square, a stained-glass window, a specially dedicated and newly established hospital, a laboratory or a lecture hall at a university?”⁵⁸ He answers the question he poses by commenting that these more usual memorials are not available to gays and lesbians:

For the state we cannot be condoned or protected, and in many instances we are even criminalized. For the big churches we are always sinful, for some of the smaller churches, conditionally almost-acceptable if we try hard enough to pass. For the health-care industry we are intrinsically pathological, at least potentially, and for higher education we have long been an object of frank bigotry. These institutions all exclude us to protect yet another institution, the family.⁵⁹

Abelove argues that the Quilt’s most “salient feature” is its removability: “The project, like us,” he explains, “has no ongoing places of its own on American soil, no necessary connection anywhere to any major American institution. Nothing located or fixed could serve well as a memorial to our losses.”⁶⁰

⁵⁷Jones, p. vii.

⁵⁸Henry Abelove, “The Politics of the ‘Gay Plague’: AIDS as a U.S. Ideology,” in Michael Ryan and Avery Gordon, eds., *Body Politics: Disease, Desire, and the Family* (Boulder, San Francisco, and Oxford: Westview Press, 1994), p. 5.

⁵⁹Abelove, p. 7.

⁶⁰Abelove, p. 7. For additional appraisal of how the Quilt in its inception was ideologically and aesthetically gay and lesbian oriented see John D’Emilio, “The Names Project Quilt: A People’s Memorial,” *Making Trouble: Essays on Gay History, Politics, and the University* (New York and London: Routledge, 1992).

However, since its inception, the Quilt has become increasingly mainstream: “the quilt is meant for popular consumption, reaching beyond those participating in the quilt-making to a wide, nonprivileged, diffuse audience: the more people the better, regardless of who they are.”⁶¹ Like the literature of AIDS, as I will argue, the Quilt is no longer only a gay, or non-heterosexual, text; “each time the quilt returns to Washington, its status as an oppositional symbol wanes.”⁶² Indeed, the first time the Quilt was displayed in Washington, then-U.S. President Reagan had not yet even uttered the word AIDS in public; by contrast, on the occasion of the Quilt’s most recent display in Washington, President Clinton attended, walking among the panels holding hands with his wife, Hillary. The Quilt has come to facilitate a public working out of grief. “In the mid-1990s it can no longer be perceived as a protest to the nation; it has come rather to symbolize national grief.”⁶³ Or, as Hawkins puts it,

by turning the domestic sewing bee into a national effort--and one with a strong affinity with the most popular veterans memorial [the Vietnam Veterans Memorial: a structure in close proximity to the Mall where the Quilt is displayed in Washington]--the NAMES Project in effect makes quilting the work of American “citizens,” a large-scale response to public crisis.⁶⁴

Indeed, the Quilt, when displayed on the Mall in Washington, “redescribes the entire nation in terms of the epidemic--it says, America has AIDS.”⁶⁵

“America has AIDS”

Although “the equation for the majority of Americans is...Gay = AIDS,”⁶⁶ texts like the Quilt and the mainstream fictions of witness render AIDS, for Americans, a more

⁶¹Elsley, p. 193.

⁶²Sturken, p. 216.

⁶³Sturken, p. 216.

⁶⁴Hawkins, p. 769.

⁶⁵Hawkins, p. 777.

⁶⁶Urvashi Vaid, *Virtual Equality: The Mainstreaming of Gay and Lesbian Liberation*

ecumenical malady. The fictions of witness, like the Quilt, are also texts that say “America has AIDS.” Because the texts, as I will substantiate, are based on relationships of watching between characters and particularly between the caretaker and the ill other, they function even more obviously as texts of testimony and witness. The texts act as testimonials because with the perceptions of the watching narrator the reader is able to see, or witness for himself or herself, from a comfortable distance, what transpires when the world of AIDS intersects with the realms of traditionally conceived heterosexual masculinity or the conventional image of the domestic American family, realms, in other words, that the prospective reading audience would already be familiar with, even if only as popular cultural conceptions. The texts can be said to bear witness because they portray a particular experience of AIDS that can then be extrapolated to exemplify, not only the gay experience of AIDS, but the American experience of AIDS. Given the “painful...way [that] even humane and liberal eyes have discreetly turned away from the crisis as though it did not really exist” and given that there are those who “have ostentatiously been waiting for AIDS to spill over into the ‘general population’ before engaging their care,”⁶⁷ the fictions of witness testify that not only gay men have and need be concerned about AIDS, but that it is a more universal concern, that all America has and must grapple with AIDS. They do this by making it easy to identify with the character who is the caretaker of the ill other, thereby allowing the reader to witness illness, along with the caretaking character or characters, rather than being asked to identify with someone who has AIDS.

(New York: Anchor Books, 1996), p. 81.

⁶⁷Gregory Woods, “AIDS to Remembrance: The Uses of Elegy,” in Nelson, p. 158.

In looking at a number of novels that open points of identification for what I call a mainstream readership, I will question, as I approach the different categories of texts, what kinds of relationships are formed by the kinds of watching involved.

While I will argue that the watching involved between the heterosexual male narrator and the ill other is characterized by voyeurism, I will argue that the family narratives, while also involved in relationships of watching, are based more on an intersubjective dynamic. The lesbian texts will provide a transition between the other two types of texts I focus on, given that these texts are about a different kind of watching from voyeurism: they are more about seeing the other than about looking solely with self-interest.

I will turn now to a discussion of AIDS fiction narrated by heterosexual men, concentrating on two texts, a novel by the American author Louis Begley and a short story by the American writer Dennis McFarland. Begley and McFarland are both recognized authors of fiction in the United States and are reviewed regularly in the mainstream press.⁶⁸

Heterosexual Male Narrators

AIDS fictions of witness narrated by heterosexual men are characterized by a language of watching, that is, access to the tools for observation combined with distance. The novel *As Max Saw It*--a title that exposes the text's reliance on

⁶⁸See, especially, consistent reviews of their books in *The New York Times*: fiction by Dennis McFarland has been reviewed by Michiko Kakutani on March 14, 1997, by Christopher Lehmann-Haupt on April 23, 1990 and May 12, 1994, by Sven Birkerts on May 22, 1994, by Josephine Humphreys on May 6, 1990, by Laurel Graeber on May 21, 1995, and by Isabel Colegate on March 16, 1997. Louis Begley's novels have been reviewed by Michiko Kakutani on January 15, 1993, by Phyllis Rose on September 22, 1996, by Bruce Bawer on April 24, 1994, by Eva Hoffman on January 31, 1993, by Judith Grossman on May 5, 1991, and by Jack Miles on September 20, 1998.

observation and distance--written by Louis Begley, is told from the perspective of a heterosexual man. Max is a Harvard law professor who encounters his old classmate Charlie, accompanied by the young Toby, at a villa in Italy. Max's developing relationships, especially with these gay male characters, his friends Charlie and Toby, are characterized by watching and by a lack of involvement or intervention. In a review in *The New York Times* Max is characterized thus: "The author of a book on contract law, Max describes these liaisons in contractual terms."⁶⁹ The relationship of looking is established when Max first encounters Toby at the Italian villa at the edge of a swimming pool. They play backgammon, and then Toby dives into the pool: "Then he put away the set, ran to the diving board, rose from it like a tawny bird, descended, and swam so fast and so beautifully that out of respect I remained at the pool's edge" (p. 13). It is a paradigm for their relationship: Toby, immersed, is observed by Max, who remains always in a place that he believes is "safe," on the edges. This relationship of onlooking becomes acute when years later Toby becomes ill with AIDS and Max becomes threatened and afraid. Able to leave after some time spent with Toby, now quite ill, Max reports that "my watch was over" (p. 126), characterizing the time spent with Toby as though he is a guard or sentry and not his close friend.

Through some implied machinations of plot, Max may well be infected himself at the novel's end. Though Max does not recognize this, and no overt mention of it is made in the text, Max, his new wife, and their baby could be infected by the same strain of virus that kills Toby, the character who by the end of the drama is dead of AIDS and with whom Max feels he has nothing in common but their friendship. While married, Max suspects his wife, Camilla, of having an affair with

⁶⁹Bruce Bawer, *The New York Times Book Review*, April 24, 1994, p. 13.

Roland, but learns later that she in fact was having an affair with Toby: "Later...when we were well into the second bottle of a Piedmont wine, I put the question. Had he been sleeping with Camilla?" (p. 96). Roland responds, "Never. By the time I thought of it, she was banging Toby" (p. 96). During the time of the affair, Camilla fends off sex with Max by claiming a yeast infection: "She pushes him away: it's some sort of mushroom inside her, like yeast" (p. 82). After one night dancing together close at a party, they have sex anyway ("Bugger my yeast!" she whispers into his ear, p. 83). The conspicuously disclosed yeast infection is possibly a signal to the canny reader that Camilla in all likelihood has been infected by Toby, who in turn could very well have infected Max. When at the end of the novel Max's new wife, Laura, suffers some complications during her pregnancy ("She had lost a quantity of blood two days earlier, when she returned from Milan, but the doctor still hoped she would be able to keep the child" [p. 145]), there is again a suggested danger that in fact all the principle characters of the novel are infected with HIV without having any idea that this might be possible. None of this is stated; indeed not even the acronyms AIDS or HIV are mentioned within the novel. There is a good deal of looking in the novel, but it is observation with little understanding. The book has been described as a "short, powerful AIDS novel that...never mentions AIDS, and underscores the failure of human beings to acknowledge their responsibility to one another."⁷⁰ Upon returning from a trip abroad Max notes:

I was experiencing, as always when I return home from a distant place, a sense of not having fully arrived, a sort of momentary estrangement for everything that should be most familiar. It's a sensation that sharpens the power of observation (p. 105).

Max is invested in the belief that distance, not intimacy, makes perception more acute.

⁷⁰Review of *As Max Saw It*, *The New York Times Book Review*, December 4, 1994, p. 65.

Like Max in Begley's novel, Dennis McFarland's protagonist in the story "Nothing to Ask For" is also a heterosexual man whose friend is dying of AIDS. This story also relies on the language of onlooking to position the witness and caretaker. Early in the story Dan describes Mack receiving his mail: "Now he stares at the top envelope for a full minute, as Lester and I watch him. This is something we do: we watch him" (pp. 42-43).

This distance established by watching is the primary way that the heterosexual narrators in the fictions of witness "protect" themselves from illness and dying. But the distance is ultimately not only from the illness itself. The heterosexual narrators "protect" themselves from illness and dying by attempting to "protect" themselves from homosexuality.

In the beginning of "Nothing to Ask For," Dan, the narrator, describes the work of a piece of medical equipment in his friend Mack's apartment.

Inside Mack's apartment, a concentrator--a medical machine that looks like an elaborate stereo speaker on casters--sits behind an orange swivel chair, making its rhythmic, percussive noise like ocean waves, taking in normal filthy air, humidifying it, and filtering out everything but the oxygen, which it sends through clear plastic tubing to Mack's nostrils (p. 39).

It might be said that this AIDS literature, from the perspective of heterosexual men, in contrast to the gay and queer AIDS literature, is filtered for the reader in the way that Mack's oxygen is: distilling the story of a death from AIDS into a acceptable story of loss and grief, in which one can be sad, but still not involved in the everyday details of illness and decay, and not involved, particularly, in homosexuality.

Points of commonality that are extended in the stories that could portend identification between the characters turn out only to be superficial. In McFarland's short story there is, while not a common illness, a commonality of illness--Dan's

alcoholism and Mack's HIV--and this strengthens the idea that it is not illness that will render a witness implicated in the life and identity of a character ill from HIV but, in this case especially, gay identity. The narrator's closest implication in this story, aside from friendship, is his alcoholism. The disparity between them and between their illnesses is exposed most poignantly by Dan now being cured of this affliction. But it is meant to serve as a parallel for mutual caretaking between the two friends. Dan narrates that "[n]ine years ago it was Mack who drove *me* to a different wing of this same hospital--against my drunken, slobbery will--to dry out" (p. 54).

Alcoholism serves only superficially as a point of identification with his dying friend, but perhaps more strongly as a projected talisman against more illness, specifically the HIV illness his friend has. It is as though any other illness besides AIDS will act as an antibody against AIDS, the same way that reinforced heterosexuality is believed to provide an impenetrable line of defense against such an illness that comes from infection. In an essay on AIDS fiction in the classroom Annie Dawid comments that Dan, "like his best friend from college, has led an unstable and unsafe life, but he, unlike Mack, will not die of it."⁷¹

Though there is the mutuality of illness between them, there is not the common ground of shared sexual identity. The narrators distance themselves discursively from gay activities and identities. This is stressed in the scene where Dan highlights his estrangement from the more "extreme" paraphernalia of Mack and Lester's sexuality; Dan observes Lester's sex paraphernalia in his bedroom:

On the dresser, movies whose cases show men in studded black leather jockstraps, with gloves to match--dungeon masters of startling handsomeness. On the floor a stack of gay magazines. Somewhere on the cover of each of these magazines the word "macho" appears; and

⁷¹Dawid, p. 198.

inside some of them, in the personal ads, men, meaning to attract others, refer to themselves as pigs (pp. 43-44).

Dawid aptly remarks on this excerpt: “The narrator does not comment on these items, but the way in which he describes them indicates his feelings of foreignness to the materials, as if they were written in another language.”⁷² The separateness of the narrator and the separateness on behalf of the straight or otherwise unimplicated reader is reinforced even more by this telling critique of the text as a classroom tool. Indeed, consider the language of how Dawid characterizes this story as “safe”:

“Nothing to Ask For” allows the student a “safe entry”--not to mention a safe exit--into and out of this poignant story.⁷³

It is as though the author here is reassuring her students that they will still be able to practice safe (sexual) entry and exit, into and out of their story (or partner): no unsafe homosexual “entrances” here. Identification with this story, Dawid seems to suggest, will not make you gay. The watching relationship is meant to reassure the reader of these same safeties. “By empathizing with the straight, healthy narrator,” Dawid points out, “the [reader] still identifies the AIDS sufferer as ‘other.’”⁷⁴ It is in this way that the story, while constructed to reassure the sanctity of the narrator, extends reassurance and safety to its mainstream readers as well.

This exposes the primary anxiety of the heterosexual male narrators and by implication also the projected readers of this text: “the reader remains on the outside looking in.”⁷⁵ If protecting themselves from homosexuality will protect them from illness, then the way to protect themselves from homosexuality is to gird themselves against any manner of penetration, as I will come to.

⁷²Dawid, p. 199.

⁷³Dawid, p. 198.

⁷⁴Dawid, p. 198.

⁷⁵Dawid, p. 198.

Voyeurism

The distance maintained through observation in these texts therefore is not unambivalent. Watching here serves many functions. The primary relationship between the heterosexual male narrator and the gay men in the narrative whose experiences and illnesses he chronicles is one of voyeurism. Because further implication would implicate the narrator also in homosexuality and (therefore) illness, the narrators maintain a voyeuristic perspective in order to establish distance between themselves and the gay male characters they watch. This distance is established in two ways: by distinguishing themselves from the characterizations of homosexuality and illness and by descriptively immobilizing the bodies of the ill and gay other. Immobilizing serves a dual purpose: to maintain distance and also to keep the ill body intact, so that infection or homosexuality will not “leak” out onto the narrator. Fluids and illness must be contained, barriers always reinforced. (Fluids become a metonym for illness, and skin a metonym for masculinity: the impenetrable barrier.)

Max watches Toby get ill as though he is watching a piece of art take shape. He immobilizes Toby's body in his sculptural description: “Death is the greatest of sculptors. His modeling knife had removed all but the most indispensable matter from Toby's face, indenting the cheeks and lengthening and refining the nose, until it had taken the form of a coin made of yellow and gray alabaster” (p. 129). Max's role is that of observer, unimplicated in illness, in sexuality, and in death. By establishing firm boundaries in his description of Toby's waning body, Max is protecting himself against identification and infection. If part of the fear of illness, as discussed in an earlier chapter, is the body made permeable, then Max makes the ill body he is confronting solid. Similarly, in McFarland's story two ill characters--Mack and Mr.

Mears ("The two men look very much alike, though Mr. Mears is not nearly as emaciated as Mack. And of course Mr. Mears is eighty-seven" p. 50)--are snapped still in a photograph, from which Dan just manages to avoid being captured: "I stand up and step aside just in time for Mrs. Mears to snap the picture" (p. 50).

The attempt to solidify and immobilize the body of the ill other belies an ambivalence on the part of the heterosexual narrator, a combined effort to intervene, in the behavior of caretaking, and to maintain distance, by using such descriptive terms as to maintain a separation.

A psychoanalytic term, voyeurism is traditionally considered to be a sexual mechanism. It is the counterpart to exhibitionism. In traditional psychoanalysis, voyeurism is a psychic mechanism intended to maintain the fantasy of separation between male and female:

In the case of scopophilia, the active and passive positions become coded as masculine and feminine respectively (following the oedipal correlation of activity with masculinity...and passivity with femininity and castration).⁷⁶

Here, however, I am suggesting that the mechanism of voyeurism is employed to maintain the fantasy of separation between heterosexuality and homosexuality.

I suggest that what is being looked at (actively) by the narrator or the non-ill main characters and perhaps exhibited (passively) by the ill characters is not the Freudian object of voyeurism and exhibitionism--genitalia--but instead illness. And here the metonym for illness is the skin, demonstrated by an interest in and repulsion from body sores. I am not suggesting that the ill characters are willfully or consciously engaged in exhibition, but that in the anxious and ambivalent gaze of the narrator they are made to appear to be doing so. By conferring this power of

⁷⁶Elizabeth Grosz, in Elizabeth Wright, ed., *Feminism and Psychoanalysis: A Critical Dictionary* (Oxford and Cambridge, MA: Blackwell, 1992), p. 448.

exhibitionism on the ill and gay other, the heterosexual male narrators can convince themselves that they are free of their anxious and desire-tinged disavowal.

What this does of course is render the ill into objects. Voyeurism must have an object, and the witnesses conceive of no other way, without becoming implicated themselves in illness and homosexuality, of attending to their dying friends. Max asks in a rare moment of introspection that leads to no resolution or change in behavior: "But did I have the right to observe in silence? Had I not assumed some sort of responsibility for how he was cared for?" (p. 125). The ill must be rendered to some degree passive objects.

The traditional paradigm of voyeurism is men watching, women being watched (deliberately showing themselves off). In "the case of scopophilia"--of which "voyeurism and exhibitionism are the active and passive forms"-- "the active and passive positions become coded as masculine and feminine respectively."⁷⁷ The well male heterosexual witnesses, in rendering their ill friends objects, are also needing to preserve their masculinity by rendering their ill friends feminine, thus preserving stereotypes of gay as feminine and participating in some of the clichés of AIDS discourse, that by preserving their masculinity and protecting against any violation or penetration, for example, they will protect themselves from becoming or being gay and therefore from becoming or being ill and then ultimately from dying.

Freud remarks that scopophilia is "marked by... 'ambivalence.'"⁷⁸ One example of ambivalence is that the suppurating sores are offensive to Max, but he is "reassured" by them of Toby's illness, and therefore his "otherness."

⁷⁷Grosz, pp. 447 and 448.

⁷⁸Freud, "Instincts and Their Vicissitudes" (1915) in Angela Richards, ed., James Strachey, trans., *On Metapsychology: The Theory of Psychoanalysis*, The Penguin Freud Library, Vol. 11 (London: Penguin, 1991), p. 128.

In these narratives the heterosexual male figure struggles against being made, for a mainstream text, uncharacteristically marginal, not the center of attention. Max is privileged as the narrator, but his gaze is always on Charlie and Toby, the gay men in the book. However, the gay men determine the course of narration, they run the narrative. In McFarland's story there is a loaded moment when Dan confesses survivor's guilt (over his best friend, Mack, who is dying), and Lester, Mack's HIV-positive lover, in a moment of pernicious egalitarianism, offers Dan the opportunity to erase the guilt, to become infected himself (and therefore "gay," in some measure, since the method of infection Lester is suggesting requires male-to-male physical contact). Lester says to him, "Danny boy, if you feel guilty about surviving...that's not irreversible, you know. I could fix that" (p. 53). The narrator then explains, "We were both stunned." It is as though to be a heterosexual male is to disallow and disavow any penetration whatsoever, whether sexual or viral: the more one can reinforce one's heterosexuality the more one has closed up all ports of entry; one is whole and therefore impenetrable and therefore not susceptible to (this) illness and death. This is why Lester's suggestion that they "could fix that" is so shocking, because he is threatening not only the sanctity of Dan's health but his girded heterosexuality, his impenetrability. All his safety here is threatened. In Begley's novel, it is not so shocking to want to be implicated in disease if you are already implicated in being gay. A gay man might not be so "stunned" by such an implication. Max hears Charlie's "confession" of his deeds when his lover Toby is already quite ill. Charlie "unfolds his tale" of a recent night with Toby, in the present tense:

I have always been proud of my teeth. If you haven't noticed before, look: they are white and perfect, as though I had had them capped, but they are, in fact, entirely my own. The only time my gums have bled is when I have been hit on the mouth in the boxing ring. I take a metal fingernail file in the bathroom and cut my gums savagely. Crisscross. Also the insides of my cheeks. Then I go in to him....I kneel down at the side of the bed....I caress him...He thinks I want him, turns toward me....I rise from my knees, grab his waist, stoop, and take him. His stomach, his buttocks, heave against my hands. A moment later, it has been done, sealed! (p. 144).

Charlie is implicated and engaged with Toby in a way Max cannot imagine and in his safety as a witness, does not need to. Charlie exchanges fluids with Toby, does not need to render Toby's body solid in description or act.

The AIDS crisis has created a scenario where heterosexual men can look at gay men's bodies--often in various stages of disintegration--in a disinterested way. But in fact disinterest cannot be the primary mode of looking when the object of the gaze is dying or when homosexuality is such an important signifier. This creates the most ambivalence of all in the texts: the heterosexual male narrators believe they can gaze with disinterest at their dying friends, but in fact there is unexpected interest, or desire, in the gaze, and so the narrator must immobilize and solidify the body of the other in order to maintain the illusion of a disinterested gaze but also must maintain the weakness and penetrability of the other.

The heterosexual narrators in these fictions are forced to look at gay male bodies. Of course there is no such thing as simple or objective observation; one creates what one sees. The narrators become unwilling but still fascinated voyeurs, turning their friends into exhibitionists to fulfill their ambivalent desire to look, and also their ambivalent sexual desire. By establishing voyeurism--watching--as the primary interaction between themselves and the ill they minimize the possibility of

any other connection--that is, a physical one. The gaze allows distance and also establishes the gaze as the only permissible or possible relationship between them. This is especially so when the gaze is such that it immobilizes the other.

Voyeurism is the desire to look along with the desire that an Other will show (exhibit) themselves to you, or make themselves an object. This is accomplished by rendering them an object, descriptively immobilizing them, or casting them as feminine (therefore penetrable). The look itself is invested with desire, can be said to be "penetrating," establishing the narrator as the penetrator, the active figure in their coupled alliance of friendship.

Max wants to look but also disavows the object of his desire. The disavowal is evident in the immobilization of the ill other. The looking (and the care in describing) signals the desire. The voyeur both desires and is acutely threatened by the object of desire/repudiation. In one scene, after Max has ascertained that it was Toby with whom his wife Camilla had had an affair, he saves himself from shame or anger by dismissing Toby as "a little fruit" (p. 101).

The ambivalence--the acute desire and disavowal--leads to fetishism, fetishizing the surface of the ill body. The skin becomes the metonymic fetish, standing for the illness and for the degree of "openness" (sores), or penetrability, of the ill character. The skin of the character ill with AIDS becomes a phallic signifier because in the narrator's perception--recapitulating an already existing fear in the mainstream reader--the gay male genitalia *are* associated with illness. If no (gay) penis then there will be no illness (AIDS). The skin would too closely represent the actual desire and anxiety if it were not fetishized. The body made whole,

impermeable and solid--will prevent (penile) penetration which will prevent homosexuality which will therefore prevent AIDS.

Open sores on the body are a point of fear for many of the narrators. This has to do with bodily borders being transgressed, a frightening indication that borders do not hold--fluids cannot be contained and penetration prevented--and therefore anxiety that the ill body cannot successfully be immobilized by description. However, the appearance of sores also maintains for the narrators the fundamental difference between themselves and the gay and ill others. It is telling how the different characters react to sores. In *As Max Saw It*, Charlie, Toby's lover, can delicately feel for Toby's sores to avoid hurting him: "The kimono is already half-open. I caress him, first at the ankles, moving up slowly, feeling for crusts to avoid hurting the sores" (p. 144). Max, however, is acutely and uneasily aware of these signs of progression in Toby's illness. He begins by touching Toby rather *indelicately*, reminiscent perhaps of the homoerotic punching and hitting that boys engage in with one another to mask a dangerous desire for intimacy:

Toby, as usual, was on the bed, covered by a light blanket. I had pulled up a chair to be near. In a moment of abandon, I slapped him on the knee. He could not restrain a howl of pain. Moments later, seeing how upset I was, he managed a grin and showed me his leg. It was covered by what looked like leeches but, in reality, were hot, black, suppurating scabs (p. 126).

The term "suppurating" so graphically announces a breaching of bodily boundaries: what was and should be inside emerging inappropriately outside. His explanation for why he finds these sores so frightening is marked by his inability to speak of them, to acknowledge that they exist:

I found the onslaughts and retreats of Toby's sores--most often on his face, hands, and forearms--embarrassing and scary. The former, because they were so insistently visible, and yet I never alluded to

them; the latter, because they told me he was not making a recovery (p. 125).

He uses the term “scary” rather than “sad” or “troubled.” He is frightened--threatened--by Toby’s sores. They mark for him the stigma of his illness, the sign above all others that Toby is beyond recovery. When, in the story “Nothing to Ask For,” Dan is giving Mack a bath he is warned by Mack, “Are you ready for my Auschwitz look?” Dan replies resignedly that he has “seen it before,” but in fact he admits that having already seen it never constitutes adequate preparation: “The sight of him naked is like a powerful scary drug: you forget between trips, remember only when you start to come on to it again” (p. 51). That these episodes of seeing their friends’ ill bodies are described as “scary” indicates the ambivalence of the narrators in caring for their friends and the fear in looking at the bodies, a threat that they can in small measure recognize but often cannot explain.

The day of Charlie’s 60th birthday is also a turning point, for the worse, in Toby’s health. Before Charlie’s dinner party, he visits Max in the house that Toby is responsible for architecturally refurbishing. Encouraged to follow him into the new bathroom, Max observes Charlie--a man, Max notes, who “was never without a jacket in the country, inside his house or out” (p. 107)--“kick off his loafers and, more deliberately, remove his jacket, shirt, and trousers, until arms akimbo, majestic and naked, he stood in front of one of my mirrors” (p. 108). Max notes that “he wore no underpants” (p. 108).

Charlie proceeds to draw attention to each part of his body. “Do not be afraid, you little devil,” he forewarns Max, “[t]his isn’t a pass” but “a demonstration of the physiology of aging” (p. 108). “First, my face,” Charlie begins, and he points out the

elements of aging, comparing various parts of his face to sexual organs, that soon the tip of his nose “will be indistinguishable in form and jocund color from the gland that finishes my dick” (pp. 108-109), and that the shadows under his eyes are “puckered brown bags, with striations and folds like a scrotum” (p. 109). Charlie takes Max’s hand and passes “it over his breasts, under his armpits, and down toward his belly” (p. 109).

Again Charlie reassures Max that this is not sexual: “relax and avoid excitement,” he exhorts Max. “I have always thought there was a fruit inside you, but this is not your day” (p. 109). He points out his warts and shows Max how he scrapes at them. Finally Charlie holds his own penis and testicles, mentions “occasional dysfunction” and the “inevitable retreat of libido” (p. 110). and then dresses and leaves. This scene is in some measure an expression of grief over Toby’s illness, but also a direct confrontation with Max’s ambivalent watchfulness, inevitably intermingled with desire. That Charlie is compelled to frame his exhibition with reassurances that nothing about this encounter is sexual, and his references to his own visage--the part of his body that one sees most readily when looking at him--to organs of sex, leads one to suspect that there is a lot more sexual interest to the interaction than Max can admit to.

Indeed, it is the many reassurances to Max throughout the novel that he is not gay that renders him unable to be unambivalently heterosexual. In a review of the novel it is declared when “Charlie suggests that Max is gay,” that “Mr. Begley effectively conveys between the lines of the first-person narrative that this is true and that Max strives to conceal his sexual nature even from himself.”⁷⁹ It may not be as clear as the reviewer suggests, but the novel is riven with precisely this ambivalence.

⁷⁹Bawer, p. 13.

Early in the novel, when Max meets Charlie and Toby unexpectedly in China, on an evening when Charlie is confiding to Max his tale of his burgeoning homosexuality and explaining the sexual nature of his relationship with Toby, Charlie declares, "It's you, baby, who are embarrassed. And you know why? It's because you don't know how to act with a queer. Possibly you are even a teensy-weensy bit afraid. After all, at your age you are unmarried, you are an intellectual and a part-time aesthete. The profile of a homo!" (p. 56). Although Charlie teases him with asking what might happen to Max should he or even Toby make a pass at him, Max does indeed exhibit ambivalence about what his feelings might be for them, especially Toby. In an interesting and not very covert allusion to what could be taken for Max's perception of the machinations of homosexuality, "I suggested to Toby," the next day after his talk with Charlie, "that we return to the Forbidden City by what I called the back way" (p. 66).

Toby asks Max, after the evening of Charlie's revelation to Max regarding Charlie's sexual relationship with Toby, whether Max is very disappointed, Max asks, by what? and Toby replies, "Not the gay stuff, that's just how it is....I mean my not going to college and all that" (p. 66). Max reflects, "[m]y official role as a pedagogue was not something I thought about much in civilian life, outside Langdell Hall, but suddenly I realized that for this poor child--it would be necessary to accustom myself to the fact that he had turned into a young man--I represented constituted authority" (p. 67). The paternal or avuncular role to which he is assigned by Toby suddenly renders Max outside of consideration for the role of lover, someone whom, as Charlie suggested, Toby might want to make a pass at. This takes some unexpected adjustment for Max--"it would be necessary to accustom myself"--who is perhaps

slightly disappointed over Toby's placing him in this role. Perhaps he is more tempted by the possible role of the suggested near-homonym, "pedophile," rather than his more familiar role as "pedagogue."

There is another telling scene in the novel *As Max Saw It*, when Max loses his status as only observer when he is perceived to be gay by a stranger who harasses him when he approaches the venue for Toby's funeral:

The driver rolled down his window and yelled....The words were surely insults, but I couldn't make them out or understand the reason for his rage. I shook my head in a gesture of incomprehension and walked in the direction of the mourners trudging past the church and along the path uphill to the old cemetery. The cab door slammed. In a moment he was beside me. In his hand was an ax handle.

Fucking queer, he cried, asshole, you fucking crawl on the highway. I should have run your fucking ass off the road (p. 131).

In a similar confrontation in McFarland's story, after writing of the political scenarios that engage Mack and Lester, especially on the matter of protection from HIV transmission, the narrator, in a slight confrontation between drivers in a parking lot, describes, "but I feel protected today by my sense of purpose: I have come to buy a padded toilet seat for my friend" (p. 48). He is protected by not being ill and by not being gay, but by being the differentiated carer of one who is ill and gay.

These episodes crystallize what I believe is occurring in these narratives: In *As Max Saw It* being perceived as gay puts one in danger. In "Nothing to Ask For," similarly, one can be protected by being neither ill nor gay but by being the one who cares for the one who is ill and gay and therefore well distinguished, so the narrator believes, from those identities or possibilities.

The position of the lesbian witness, which I will address in the next section, is more like that of the gay male narrators than that of the heterosexual male narrators. This

will be illustrated first by a comparison of scenes from three different texts that feature the narrator bathing the ill other. This comparison is meant to suggest two very broad things: that there is something about being implicated in an identity (gay or lesbian) connected with illness (AIDS) that allows connection rather than frightened distance in fiction. And that there is something particular to heterosexual male narrators that places them in the position of promoting narrative distance and therefore occupying the place of a general reading public, who can be made to feel concerned and moved but kept safely removed from any implication, both in homosexuality and in what is conceived of as gay-related illness.

Bathing and the Lesbian Witness

I will present episodes from three different stories that suggest three very different kinds of narrative perspective and therefore three different kinds of AIDS fiction. In these scenes an ill character is bathed by the story's narrator. These episodes will illustrate a distinct difference in description and attitude, and in levels of engagement, between the well narrator and the ill other, according often to the identity, and specifically the sexual identity, of the narrator and how that characterizes his or her relationship to the ill other.

The first scene is from the story "Nothing to Ask For." The second is from a short story by Allen Barnett, a gay writer, now deceased. The third is from the novel *The Gifts of the Body* by Rebecca Brown, a lesbian writer. Both Barnett and Brown are known and highly regarded among gay and lesbian readers but have not been reviewed in mainstream periodicals.

In the first scene Dan is bathing Mack, which so unsettles him that he longs for scotch, something, he admits, “which I have not actually tasted in nine years” (p. 51). He believes “Lester has tricked me into this task of bathing Mack” (p. 51). When he submerges a folded towel to the bottom of the bathtub to serve as a cushion for Mack to sit on and encounters the towel’s “resistance” and waits “for the bubbles to stop surfacing” he thinks that “there’s something horrible about it, like drowning a small animal” (p. 51). This experience obviously makes him extremely uncomfortable:

I help him off with his clothes now and guide him into the tub and gently onto the underwater towel...I begin soaping the hollows of his shoulders, the hard washboard of his back....I soap the cage of his chest, his stomach....the steep vaults of his armpits....At last I give him the slippery bar of soap. “Your turn,” I say.

“My poor cock,” he says as he begins to wash himself (pp. 51-52).

His squeamishness about touching his friend’s penis is conspicuous here. When Dan responds to Mack’s statement after the bath that he has lost interest in sex, Dan narrates that the “apparent understatement of this almost takes my breath away” (p. 52), yet he is still unable to wash Mack’s penis, supposedly to Dan the least “scary” thing about him at the moment, when the rest of Mack’s body is so obviously ill and emaciated and his penis is so evidently, to both of them, asexual. Dan’s ambivalence emerges here: his certainty that Mack’s penis is out of commission yet his willingness to touch nearly every corner of Mack’s body except that.

In contrast, in Allen Barnett’s story “*The Times As It Knows Us*,” a story of a group of friends--all gay men--spending the summer together in a house on Fire Island in a year when they are all living amidst the illness and loss of their closest

companions, the narrator and his housemate Stark wash their friend Enzo, feverish and afflicted with diarrhea:

I pulled off Enzo's soiled pajamas, turned the shower on, and took off the old gym shorts I slept in. "Hand him over," I said from within the lukewarm spray.

Enzo wrapped his arms around my back and laid his hot head on my shoulder....I gradually made the water cooler and sort of two-stepped with him so that it would run down his back, and sides, and front....Stark used the pump bottle of soap...to lather Enzo's legs. I slowly turned the water cooler.

"Can we get your head underwater a little bit?" I asked, though Enzo was barely conscious. "Let's see if we can get your fever down."

"I think we're raising it," Stark murmured. He was washing Enzo's buttocks and his hand would reach through Enzo's legs and wash his genitals almost religiously. He reached through Enzo's legs and lathered my genitals as well....

....I maneuvered him around to rinse the soap off. Stark waited with huge towels. While I dried us both, Stark changed Enzo's bedclothes, tucking the fresh sheets in English style. Then he helped me carry him back to bed.⁸⁰

There is no squeamishness about touching bodies here--any part of the body--the task at hand to get their friend clean and his fever down.

In Rebecca Brown's *The Gifts of the Body*, a novel about a woman who cares for clients with AIDS in their homes, there is a similar episode of bathing in which the unnamed female narrator bathes Mrs. Lindstrom, an older woman with AIDS. The use of "we" in this bathing scene implies an interaction, that they are doing this together. This is typical, I want to suggest, not only of fiction told from the perspective of gay male characters, but also fiction narrated by women, or more specifically, lesbians.

I put my hand in the tub. I touched the water to the inside of my elbow to test the temperature the way you do when you wash a baby.

⁸⁰Allen Barnett, "The *Times* As It Knows Us," *The Body and Its Dangers* (New York: St. Martin's Press, 1990), pp. 98-99.

I helped her to stand and walk to the edge of the tub. We dropped the towel. I lifted her arm and put it around my neck. She held on to me tight, and we sat her on the edge of the tub.

"Are you all right?" I asked.

"Yes," she said.

I held her there a few seconds, then lifted her body and slid her onto the bath seat. She gripped the handles on both sides of the seat. The veins in her hands stood out. She was holding her breath and her shoulders were tight. I lifted her legs and put them in the water.

After a while she let out her breath and her shoulders relaxed and she said, "Oh, this water feels nice."

I soaped the sponge and washed her arms. I washed her neck and back and stomach. When I got to her ribs I hesitated. I was afraid about the scar.

"It doesn't hurt anymore," she said.

Then I could wash the place around the scar (pp. 21-22).

Brown's episodes are much more like Barnett's--the gay men caring for one another--than the McFarland episode of a heterosexual man caring for his friend.

In terms of intimacy and involvement in AIDS narratives, lesbian narrators behave and narrate their interactions with an infected other much more like gay male narrators than like heterosexual male narrators. This has to do only partly with a common gay identity, and even more to do with not feeling threatened by being physically close with a gay man or with someone who is ill with AIDS. There is no privileged position to defend, nothing perceived to be under threat by capitulating to intimacy.

Lesbian AIDS Fiction

There is not a lot of AIDS fiction that is narrated by, authored by, or directed toward a lesbian reading audience. What there is focuses primarily on a lesbian narrator's relationship with a gay man who is infected with HIV, already ill, dying or dead from

AIDS. I will look here at the AIDS fiction of Rebecca Brown as a primary example of this limited genre.⁸¹

Brown is a lesbian author, and in her AIDS story "A Good Man," the protagonist is a lesbian (and the story appears in a volume of lesbian writing) whose very close friend becomes ill and hospitalized.⁸² The author of this story is implicated in the discourse of AIDS in a way that the other authors of fictions of witness are not, but neither is she implicated in the same way that gay and queer authors are. While in "A Good Man" the narrator is clearly a lesbian, there is some mystery over the identity and the sexuality of the narrator in *The Gifts of the Body*. Though Brown's novel "won several awards, including the Lambda Literary Award for lesbian fiction,"⁸³ there is no clear indication inside the text that any of the characters is a lesbian. For example, by not giving the narrator a name or a sexual identity, and by giving a friend or companion of the narrator's, near the end of the book in the only such reference, the gender-neutral name Chris, Brown not only obscures but refuses to ascribe a sexual identity to the narrator. One reason why Brown might refuse to provide her narrator with a name or sexual identity is an effort to make the text more mainstream, to take it out of a marginal lesbian world and to make it universal.

Rebecca Brown's *The Gifts of the Body* is a novel made of stories about a "home health aide" for people with AIDS. Each chapter concerns a different episode of a visit to a person with AIDS; some episodes re-visit the same individual and so there is some sense of progression, of finding out what happens to the characters.

⁸¹Some of the authors who have written lesbian AIDS fiction include Sarah Schulman, Lesléa Newman, and Mary Beth Caschetta.

⁸²Rebecca Brown, "A Good Man," in Naomi Holoch and Joan Nestle, eds., *Women on Women 2: An Anthology of American Lesbian Short Fiction* (New York: Plume, 1993).

⁸³Lucy Jane Bledsoe, "Meanings in Small Acts," *The Harvard Gay and Lesbian Review*, Vol. 4, no. 1, Winter 1997, p. 40.

The difference between lesbian and heterosexual men in relation to an ill character in narrative perception is illustrated by another scene from Rebecca Brown's novel that features the narrator comforting an ill client. In the first chapter, "The Gift of Sweat," the narrator describes her interaction with Rick; she puts her hand on his back, she gets into bed with him:

I got onto the futon. I slid on very carefully so I wouldn't jolt him. I lay on my side behind him. I could feel him shaking. I put my left arm around his middle. I slipped my right hand under his head and touched his forehead. It was wet and hot. I held my hand on his forehead a couple of seconds to cool it. Then I petted his forehead and up through his hair. His hair was wet too. I combed my fingers through his wet hair to his ponytail....He was still shaking. I pulled my body close to him so his butt was in my lap and my breasts and stomach were against his back. I pressed against him to warm him. He pulled my hand onto his stomach. I opened my hand so my palm was flat across him, my fingers spread (pp. 6-7).

In the accounts of Rebecca Brown's protagonist visiting and interacting with people with AIDS, the narrative is not laden with the same vocabulary of watching, of standing by and observing or of descriptively establishing distance, as I discovered in the heterosexual male narrated AIDS fiction. The language and the behavior here are more entangled, involved, and interactive. There is a recognition of difference but no attempt to establish difference. Here physical proximity is possible, exemplified by how the narrator in the above passage molds her own body to the shape of the sick character, and in the exchange of warmth and--in the common panicked discourse of HIV--proscribed body fluids. The watchful position of the heterosexual male narrators placed them at a distance, which was accomplished by describing the bodies as distant and unable to move. In the lesbian texts, physical proximity is possible. For example, skin does not carry a frightening fetishistic fascination.

In another bathing scene in Rebecca Brown's novel, in a chapter called "The Gift of Skin," Carlos at the beginning of the story touches the narrator's hands and says, "Your skin feels so clean" (p. 44). The title of the chapter implies that by bathing him (by surrounding him with water) she gives him the gift of his skin back, of borders, of a sense of whole being.

I took his palms on top of mine and held them loosely, the way my father did when I was afraid of water and he was teaching me to swim. I held my palms beneath his and lowered them into the water. His hands slipped in with me. I could feel his hands tremble. I held his hands until they were still. I could feel the shape of him, the texture of his skin made smooth by water (p. 46).

At the end of the story the narrator comments, "Our skin felt clean" (p. 47). She has provided him with a sense of boundary and self that does not preclude intimacy, something the heterosexual male narrators could not reconcile themselves to. "When we finished," she narrates, "I didn't have to tell him how we needed to move because his body gave to mine" (p. 47). In this case, trying to give him sturdy bodily boundaries is not an effort to immobilize the ill figure but, on the contrary, to provide him with some autonomous movement.

The Ill Other

While the dynamic of watching between the lesbian narrator and the ill other is not one of voyeurism--indeed there is less one-sided watching than there is mutual engagement--the lesbian witness, however, is like the heterosexual male witness in one significant way: they each, with varying degrees of self-consciousness, experience difficulty in reacting to an ill other. In the case of the lesbian AIDS fictions of witness, mainstream indicates not just nongay but also, even more evidently, white. There is a chapter in Brown's novel that indicates a discomfort not

with signs of infirmity, and not with differences in sexual identity, but with differences in race, specifically blackness.

What is “scary” for the lesbian narrators is different from what is “scary” for the heterosexual male narrators. It is still difference, but not difference based on sexual identity, or even on illness or death. There is an episode that Brown’s narrator describes as “scary,” the same word that Dan and Max use to describe their reactions to their friends’ overtly ill appearance. As in the texts in which the heterosexual male narrators found ill gay bodies “scary” because they were transgressing boundaries that normally would keep their illness and difference inside them, Brown’s narrator encounters a client with sores that she finds especially “scary”: “This guy was the scariest to look at” (p. 117). In other episodes the narrator is generally at ease with the infirmities of her clients, but this one in particular frightens her:

The sores were all over him. I don’t know why the sight of him frightened me but it did. I hadn’t felt frightened that way before and I didn’t want him to see it in my face, I didn’t want him to feel ashamed about how he looked (pp. 118-119).

Brown’s narrator tries to understand why this ill man should so unsettle her:

Maybe it was seeing it so present, so visible, on the outside, and all the time, not something you could pretend for a while you didn’t have, or something that people who only saw you for a while might not see, like chronic diarrhea or the vomits. How he looked was very sick, he looked like he had the plague (p. 119).

However, while the narrator’s reasoning is insightful, it is obliquely offered throughout the story that this character, unlike the others, who were men and women that were white and Hispanic, is black:

His sores were dark purple and about the size of quarters. The edges of them were yellow and his skin was dark brown (p. 117).

His hair is described as “tight and curly” (p. 118) and he refers to an important trip he makes to Africa: “it was like back home” (p. 121). So it is not, in this novel, sexual difference that creates distance between the ill figure and the narrator but racial difference. The ill character, Keith, dies at the end of the chapter, and as he is dying she “leaned over the bed and took him in my arms. I held him as tenderly as I could” (p. 126). Even in being able to take him in her arms she is able to overcome her fear only somewhat, holding him “as tenderly as [she] could” rather than very close, as we have seen her capable in other scenes with other ill characters.

The reason the lesbian AIDS texts provide an interesting transition point is not just the contrasts that emerge from the comparisons of bathing episodes, but the fact that the Brown novel seems precisely to offer a negotiation of the types of identification and alienation that are possible between a well subject and ill objects, or others. The fact that the narrator, who might be but is not definitively a lesbian, is very comfortable with the ill gay men with whom she comes in contact, and able to become comfortable with the suburban white women, and is only barely able to become comfortable with the black man illustrates a spectrum of comfort levels with otherness: when otherness is about class, lifestyle, and race, and not about sex or sexuality.

In another lesbian AIDS novel, Sarah Schulman’s *Rat Bohemia*, the lesbian narrator describes how accustomed she is to the death and dying that now is part of her daily world:

People we know die all the time and there is really no way to react. What can you do? Freak out every day? Dave brings memory up all the time. I can see how appalled he is at how little any of us react to AIDS deaths.⁸⁴

⁸⁴Sarah Schulman, *Rat Bohemia* (New York: Plume, 1997; originally published 1995), p. 44.

This lesbian narrator expresses a familiarity and sometimes genuine “disinterestedness” in AIDS and those who are ill. This attitude illustrates how accustomed this population (of white urban lesbians, say) has become to the illnesses and deaths of their gay male counterparts. But this is not to say that there is equal comfort with all illness and death.

In the episode where the narrator of Brown’s novel is bathing Connie (Mrs. Lindstrom) and she stops at Connie’s mastectomy scar, she expresses also an inclination initially to feel frightened: “I was afraid about the scar” (p. 22). A scar signifies a rupture in the body but here the rupture is safely sealed. Also, Connie is more familiar to her, a white older woman, member of an extended family, a mother and grandmother. It is otherness that is frightening. In the family the otherness is the illness and the sexuality, but still they are of a kind. It is the sameness, the prescribed roles, that are inhibiting there, not difference, which I will turn to.

Families can feel more familiar and less threatening in a way that can override the terrors of AIDS. This is part of the controversy of course: “bringing AIDS into the midst of a typical white suburban family.”⁸⁵

Family AIDS Fiction

While the family narratives may seem the most obviously mainstream--representing the domestic family scene--they are also deeply invested in reconfiguring personal identity and the dynamics of the family, especially as it is conceived to exist in suburban America. Any illness is transformative of interpersonal dynamics--“sickness tests family strength and resiliency as few other crises do”⁸⁶--and

⁸⁵Pastore, p. 41, in reference to Alice Hoffman’s *At Risk*.

⁸⁶Carol Levine, “AIDS and the Changing Concepts of Family,” in Dorothy Nelkin,

HIV and AIDS especially challenge some very fundamental conceptions of family: assumptions that everyone is heterosexual, for example, or that parents will die before children, or that family relationships and intimacies cannot change quite radically.

Simply, "AIDS throws families into crisis."⁸⁷

It might be asked why I am not here referring to the family narrators as "heterosexual women narrators" in the same way that I identified the heterosexual male and lesbian narrators based on a differentiating criteria of sexual identity. One difference is that the family fictions are not narrated by a single character. Though the primary perspective in each case--in Alice Elliott Dark's story and Alice Hoffman's novel--belongs to the mother of the ill character, the narrative point of view is third person. Additionally, it is not the sexual identity of these protagonists that determines their narrative strategies in approaching the ill character, but their participation in a family dynamic.

In the family narratives the individual who has AIDS--the very fact of the introduction of AIDS into the family--changes the structure of the families and the meaning of its roles. In an interesting reversal of roles in the story "In the Gloaming" it is not the son so much who requires recognition for autonomous agency, as is generally expected in theories of child development, for example, but the mother. Or, in a recapitulation of child development, the child must recognize the separateness, the autonomy, of the mother. The son, as it were, gives birth--proffers individuation--to the mother. Here he asks questions that will draw out his mother as an individual that he may not have recognized before:

David P. Willis, and Scott V. Parris, eds., *A Disease of Society: Cultural and Institutional Responses to AIDS* (Cambridge and New York: Cambridge University Press, 1991), p. 48.

⁸⁷Levine, p. 51.

“Who’s your favorite author?” he asked one night.
 “Oh, there are so many,” she said.
 “Your real favorite” (p. 237).

Theorist Jessica Benjamin comments that the “mother is the baby’s first object of attachment”:

She is provider, interlocutor, caregiver, contingent reinforcer, significant other, empathic understander, mirror. She is also a secure presence to walk away from, a setter of limits, an optimal frustrator, a shockingly real outside otherness.⁸⁸

Though the mother is “rarely regarded as another subject with a purpose apart from her existence for her child,”⁸⁹ now that he is dying of AIDS Laird declares to her, “I want to get to know you” (p. 233). In another obvious way that roles are transformed, many times the narrator comments on how unusual it is--not unwelcome but “wrong”--that a mother should again be caring for her thirty-three-year-old son. “How many mothers,” she asks herself, “spend so much time with their thirty-three-year-old sons?” (p. 230). And again after he has died:

“It’s so wrong,” she said angrily...“A child shouldn’t die before his parents. A young man shouldn’t spend his early thirties wasting away talking to his mother. He should be out in the world. He shouldn’t be thinking about me, or what I care about, or my opinions. He shouldn’t have had to return my love to me--it was his to squander” (p. 248).

These questions and frustrations expose the reconfigurations of the positions of the others in the family--those who are not ill--in terms of roles, who is looking after whom, how the relationships change. Though the family narratives seem to be little concerned with sexual identity, they *are* concerned with sameness and difference--that is, with configurations of identification--along other lines. They are tales of how a family tries to maintain its familiar structure and how it must adapt to incorporate the

⁸⁸Jessica Benjamin, *The Bonds of Love: Psychoanalysis, Feminism, and the Problem of Domination* (New York: Pantheon, 1988), p. 23.

⁸⁹Benjamin, pp. 23-24.

intervention of illness and specifically AIDS, an illness thought of as antithetical to the family.

The novel *At Risk* is controversial precisely for this reason. The novel features an eleven-year-old girl who, within the structure of a suburban American family, becomes ill five years after receiving a blood transfusion for an operation. Even gay male writers--David Leavitt, for example--have criticized the novel for bringing together AIDS and the family.⁹⁰ Another critic "wonders whether Hoffman is actually working...to reassure the mainstream audience and let it maintain its protective distance from AIDS."⁹¹ AIDS and the family is a highly controversial combination, particularly as the family is often believed to constitute a barrier to the virus, recalling such cultural perceptions as: monogamy will keep you safe, promiscuity is dangerous; regular domestic heterosexuality will keep you safe, the gay "lifestyle" is dangerous.

Alice Hoffman often writes about a standard suburban setting that is disrupted by something eerie and unknown that eventually becomes, if not familiar, a positive catalyst for transformation. Often that unknown phenomenon is something much more magical or mythic and unlikely--a giant in her novel *Illumination Night*⁹² and witches in *Practical Magic*⁹³--than illness. The projected progression of her oeuvre then suggests just how unlikely and unfamiliar AIDS is in this suburban white middle-class setting. Polly, the mother in *At Risk* of eleven-year-old Amanda, who becomes ill from AIDS developed from the transmission of HIV through a blood

⁹⁰Leavitt wrote that he "sensed, in some deep way, that this was going to be bad for us." See David Leavitt, "The Way I Live Now," *The New York Times Magazine*, July 9, 1989, p. 28.

⁹¹Cady, p. 239.

⁹²Alice Hoffman, *Illumination Night* (New York: Putnam, 1987).

⁹³Alice Hoffman, *Practical Magic* (New York: Putnam, 1995).

transfusion during surgery years earlier, feels that AIDS is a word “she shouldn’t even know” (p. 59). Polly is a photographer. Her project, a book she is working on with a writer, is “photographing séances--what Laurel Smith calls readings” (p. 20). Laurel, the medium who is the subject of Polly’s book of photographs, is emblematic of the magical and unknown that Hoffman writes about frequently in her novels, but so also is the particular illness of AIDS in 1988 in the suburban white middle-class milieu. It is unexpected and unfamiliar, incredible, and transformative.

This is what I think is key in family AIDS fiction: the illness is transformative of the family dynamic itself. It must transform itself to accommodate, indeed domesticate, what is foreign and unbelievable and unacceptable. While the “book [for which Polly is taking photographs] about Laurel Smith was supposed...to be a mild debunking” (p. 22), in fact Polly “feels vaguely embarrassed by it and has kept it a secret from people like her parents, who she knows would disapprove” (p. 15). In this novel what is most unexpected and strange is at first disregarded, disbelieved, but must then be allowed into the family setting and allowed to become familiar. The project on Laurel Smith “has not turned out [to be a debunking]. Laurel looks more like a librarian than a medium and, séances aside, her behavior is extremely sensible” (p. 22).

It is not the specter of homosexuality, but, like homosexuality, it is the specter of what is “not family,” or not familiar, that demands a reorganizing of family roles. The most obvious assumption that must be reversed is that children don’t die before their parents die. “There is a wasp in the kitchen” (p. 11), begins the novel with a simple declarative sentence, suggesting, mildly at first, that the domestic scene is not without its small perils: “the wasp hovers above the children” (p. 11). When Polly

recalls her last photography project--“an in-depth study of coping with death” (p. 21)--she also recalls that “[a]fter photographing her first terminal patient, Polly spent half an hour throwing up by the side of the road” (p. 21). This is a family that is unaccustomed to and unprepared for premature illness and death.

Alice Elliott Dark’s short story “In the Gloaming,” is a narrative of a woman whose son is dying of AIDS. The son Laird does not threaten the family with his illness or his homosexuality, but he does transform it by bringing these facts and conditions of his life home. When Janet asks her son if he has had love in his life, it signals how little she has known of his homosexual alliances (p. 239); and when pondering how much a parent still thinks of her children with their childhood personalities and inclinations she realizes

[s]he was still surprised whenever she went over to her daughter’s house and saw how neat she was; in her mind, Anne was still a sloppy teen-ager who threw sweaters into the corner of her closet and candy wrappers under her bed (p. 234).

Similarly it “still surprised her that Laird wasn’t interested in girls. He had been,” she asks herself, “hadn’t he?” (p. 234). There is no condemnation, nor dwelling, on the fact of his homosexuality; in fact there is barely, except for these references, any mention of it at all. The narrative will call into question the assumptions of family, but only the nuclear family that Laird has returned to. After Laird declares that he wants no more visitors, she notices that then “he softened. Not only did he want to talk again; he wanted to talk to her” (p. 230). The mother muses on family relationships:

Were other people so close, she wondered. She never had been, not to anybody. Certainly she and Martin [her husband; Laird’s father] had never really connected, not soul to soul, and with her friends, no matter how loyal and reliable, she always had a sense of what she could do that would alienate them” (pp. 233-234).

Then she considers how easy it is to sever the presumed bonds of intimacy, thinking, “[o]f course, her friends had the option of cutting her off, and Martin could always ask for a divorce,” but realizes that “Laird was a captive audience. Parents and children were all captive audiences to each other.” And “in view of this,” she ponders, “it was amazing how little comprehension there was of one another’s stories” (p. 234). Now that her son has returned home ill, she is only now able to ponder the assumptions of family expectations and bonding, and how the stories one tells creates the narrative of the family.

The story, told from the mother’s point of view, describes the evenings--the gloaming referring to a time that comes between the end of day and onset of night--when the two of them--mother and son--talk and weave a profound intimacy: the “air around them seemed to crackle with the energy they were creating in their effort to know and be known” (p. 233). The gloaming itself is indicative of transition: the passage from day to night echoes Laird’s passage from life into death, but also it is a mark in the story of transitions of expected family expectations. Janet now waits eagerly for precisely this time of day, the time of transition:

Quickly, she became greedy for their evenings. She replaced her half-facetious, half-hopeful reading of the horoscope in the daily newspaper with a new habit of tracking the time the sun would set, and drew satisfaction from seeing it come earlier as the summer waned; it meant she didn’t have to wait as long. She took to sleeping late, shortening the day even more (p. 234).

It is an awakening for the mother, a way of realizing things about her family and herself as she lets go of her son in his last days. Though she “found it hard work to keep up with him...it was the work she had pined for all her life” (p. 229).

The story follows a narrative paradigm of classical mother-son bonding and separation: the son is nurtured by the mother, the son leaves home, the mother remains alone. But here this narrative trajectory is disrupted by the son's illness. Indeed, the son is nurtured by the mother, he leaves, and she is alone, but thirty years or so after the original formation of the infant-mother bond, the son has returned home to die. AIDS here, as elsewhere, reconfigures family life and calls up different forms of identification. For example, their intimacy during his illness recalls his being taken care of by her as an infant but is also cast as a quasi-romantic intimacy as well. Laird remarks,

“I’ve been remembering a lot, lately.”

“Have you?”

“Mostly about when I was very small. I suppose it comes from having you take care of me again. Sometimes, when I wake up and see your face, I feel I can remember you looking in on me when I was in my crib. I remember your dresses” (p. 231).

Through their discussions they are not just going over the facts of the family, but discursively transcribing them and therefore creating them. In other words, they are writing the short story of their family life. They are reconstituting and reconfiguring the family as they talk; for her it is most like when he was a baby and everything still was in flux, was open to change, “as if he were a small, perfect creature again and she could look forward to a day of watching him grow” (p. 234). It is that feeling that she has back, that the family--their relationships--can change, and this is what she so treasures and looks forward to--“she became greedy for their evenings” (p. 234)--that after many static years the family can change again.

Here we see a reconfiguring that revolves around their original roles and evolves from there. Their relationship reverts to the primary relationship of young mother and infant but absorbs their maturity, the intervening years, and allows for the

invention of new behavior, a new perspective on it. Their flirting, according to her, is a replaying of their earlier relationship. Yet only now she realizes that "Laird had been the love of her life" (p. 240). When they somewhat flirtatiously discuss literary representations of sex, Laird suggests they change the subject. Initially she suggests that "[m]aybe we shouldn't," allowing a more personal discussion of sex, before she suddenly and parentally puts an end to it:

"I've been wondering. Was that side of life satisfying for you?"

"Ma, tell me you're not asking me about my sex life."

She took her napkin and folded it carefully, lining up the edges and running her fingers along the hems. She felt very calm, very pulled together, as if she'd finally got the knack of being a dignified woman. She threaded her fingers and laid her hands in her lap. "I'm asking about your love life," she said. "Did you love, and were you loved in return?"

"Yes."

"I'm glad."

"That was easy," he said.

"Oh, I've gotten very easy in my old age."

"Does Dad know about this?" His eyes were twinkling wickedly.

"Don't be fresh," she said.

"You started it."

"Then I'm stopping it. Now" (p. 239).

If the "mother is the baby's first object of attachment, and later, the object of desire,"⁹⁴ then here mother and son are in some measure reverting to an early erotic attachment (by way of flirtation). Laird makes a series of funny faces after this conversation and "[h]is routine carried her back to memories of his childhood efforts to charm her" (p. 239). AIDS disrupts and redefines conventional family relationships. AIDS intervenes in the way we live and perceive family life.

⁹⁴Benjamin, p. 23.

Like the heterosexual male narrated fiction and the lesbian narrated fiction, the family fictions of witness could also be characterized by the relationships of watching they contain. In *At Risk*, for example, it is tempting to dissect how watching is a template for the family relationships given the mother's professional engagement in photography and the influence of the character Laurel, who is a professional "seer." In the novel *At Risk* watching is always startling. When characters watch they always end up seeing something that they hadn't expected to see (and often that they have no background or experience for incorporating).

In an episode of watching, Laurel watches Amanda's family through the windows of their house from outside:

Laurel rests her bike on the grass across the street; she can see into their kitchen window from here....She's checked some of the other houses on Chestnut, peered into other kitchens and living rooms....Sometimes she thinks the Farrells are just like anybody else, and it makes her feel good. She believes she knows what's going on at their table, in their beds, just because she sees them through their window... (p. 115).

This episode serves as a warning that appearances conceal. What Laurel sees from a distance is a family unafflicted by worries:

...but she has no way of knowing that Amanda can barely eat and that her lack of appetite seems catching, for half of the food Polly cooks is scraped into the trash. She has never imagined that as soon as dinner is gotten through, Charlie [younger brother] escapes to the basement like a turtle into his shell; that Polly and Ivan [father] can no longer kiss, that their lips seem broken and their tongues don't work; that Amanda can no longer swallow the vitamins her father gives her. She saves them in her cheek and when no one's looking spits them out, her head leaning far into the toilet (p. 115).

It becomes clear in the family AIDS narratives that watching changes the one watching. They become transformed by the things they see. This is not the paradigm of voyeuristic watching, where the watcher is static and unchanged and unobserved,

but a reconfigured paradigm whereby the watcher is far more affected than that which is being watched. Watching creates intimacy rather than instilling distance. Laurel changes after this episode of watching: “She thinks of herself watching, peeking into other people’s lives through the dark, and she’s disgusted” (p. 117). She breaches the paradigm of distant watching in response to her disgust the very next day when she comes to visit Amanda and brings flowers and a pie. It is those who refuse to “see” who remain static and unchanged.

Already in the novel there are two conceptions of watching: Polly as photographer, who watches and captures from a distance, and Laurel, a medium, whose profession it is to see what is not always available for others to see (and in doing so to connect two disparate worlds). Both of them are professional witnesses, as it were, but often see what they are not prepared for:

so far not one spirit has appeared on film. Polly has tried slower shutter speeds and faster film, she has switched from color to black-and-white. Some of the photographs, though ghost free, are remarkable. In several Laurel Smith...is completely unrecognizable. There’s a photograph in which she looks like an old, dark woman and another in which she doesn’t appear to be more than a child (p. 20).

Though there is watching in these texts, the watching is not voyeuristic, it is not distant or removed, and because the stories are not narrated in the first person, there is a greater sense of mutual looking, which serves to establish familiar family roles and dynamics and also then to reconfigure and reconceptualize them. A more useful term here than voyeurism, I propose, would be Jessica Benjamin’s conception of intersubjectivity.

Benjamin, whose work relies on a mix of developmental psychology and more traditional Freudian psychoanalysis, propounds the intersubjective view of psychic development. “The intersubjective view,” Benjamin writes, “maintains that the

individual grows in and through the relationship to other subjects.”⁹⁵ Here the relationships are not formulated by distant watching, but by interaction. For example, in an observation that recalls the effort on the part of Max to immobilize what he perceives as the menace of Toby’s infirm body, Janet, the mother in the story “In the Gloaming,” comments that her son Laird “stretched out his hand to her, and the incipient moonlight illuminated his skin, so it shone like alabaster” (p. 237). However, here, rather than trying to still him or immobilize him, she is looking for signs of life in his still body. “It was a sight that made her stomach drop” and “[a]utomatically, Janet looked for a stirring in his chest” (p. 237). Rather than just watching “[s]he responded to his needs, making sure there was a fresh, clean set of sheets ready when he was tired, food when he was hungry. It was what she could do” (p. 237).

In the novel *At Risk* watching is what breaks down and what signals the fracturing of the family as a unit. Intersubjectivity is compromised by the crisis in the family: Polly “can’t turn to Ivan because if she did she would have to see how hurt he is” (p. 89). Further,

She can’t look at Charlie, sitting out on the steps, waiting for a friend who will never appear. She can’t listen to Madonna singing over and over again, “True love, oh baby,” when she knows that her daughter will never stand in the dark on a summer night and, more aware of her own heart beating than of the mosquitoes circling the porch light, lean her head upward, toward her first kiss (p. 89).

Ivan takes to speaking regularly to a man on an AIDS crisis hotline. After an argument about whether Amanda can sleep over at a friend’s house,

Ivan closes his eyes and immediately wishes he could talk to Brian; the thought startles him and then he thinks, Of course. He wants to telephone a hotline and speak to a stranger because there is no one he

⁹⁵Benjamin, pp. 19-20.

can talk to in this house anymore, there aren't even words to use (p. 116).

What helps to begin to mend the family is the intervention of Laurel, who over and over in the novel is described as being very much like Amanda, the figure whose illness threatens the sanctity of the family as a family. There are references throughout the novel to the identification and implied alliance of Laurel and Amanda, often through the metonym of their hair; the first description of her aligns Laurel with Amanda: "She has long blond hair like Amanda's" (p. 22) and "Polly, who had never divulged anything about her personal life before, had said to Laurel, 'My daughter would love your hair. She wants to grow it till it's as long as yours'" (p. 87). Later Laurel and Amanda bond over a discussion of their hair:

"How long did it take you to grow your hair that long?"

Amanda asks Laurel.

"The last time I cut it I was fourteen," Laurel says. Then she adds, "I can tell you use conditioner. You don't have any knots."

Amanda smiles. She's usually shy around adults, but Laurel Smith doesn't seem much older than she is. It's as if they were both teenagers....

"Have you ever been in love with anybody?" Amanda asks Laurel.

"Not yet," Laurel Smith admits.

"Me either," Amanda says (p. 121).

It is her similarity to Amanda that reweaves the threads of intersubjectivity that establishes intimacy in a family, particularly between parent and child. The intersubjective view "assumes that we are able and need to recognize that other subject as different and yet alike, as an other who is capable of sharing similar mental experience."⁹⁶ It is through Laurel that Polly can finally begin to accept the changes necessary. When Polly finally accepts Laurel it is the first signal of the resiliency of the family. Initially Laurel is a threat to the familiar configuration of the family:

⁹⁶Benjamin, p. 20.

“When she sees Laurel, Polly feels something sharp along her back, as if she were an animal with her hackles raised” (p. 118). “She doesn’t trust Laurel Smith” and “[i]t kills her that Amanda would rather spend time with a stranger than with her own mother” (p. 145). Polly “figures she has a right to be suspicious when a woman who communes with spirits wants to brush her daughter’s hair” (p. 121).

The initial effort to change is marked by Amanda’s final gymnastics meet, which Amanda has invited Laurel to attend. When Laurel goes to the meet at the local school to watch Amanda perform, she initially sits on the side of the bleachers where the opposing team’s fans sit: “you’re sitting on the wrong side,” Polly tells her (p. 146). It is not an untroubled amelioration. When Polly asks Laurel “with absolutely no warmth” to sit with her and Ivan, and Laurel replies “Oh, no. I couldn’t,” Polly “blurts out”: “You’ve already forced yourself on us, you might as well go ahead and sit with us” (p. 146). However, by bringing her to the correct side, Polly is in effect inviting Laurel into the family and therefore acquiescing in changes in the definition of the family. “I could never steal her away from you,” Laurel reassures her, “She can’t be stolen. She’s yours” (p. 146). Near the end of the novel the possibility of intimacy returns to the family when “Polly holds Ivan tightly. He smells good, and he feels good, too, the way he always has” (p. 213). In the slow work of reformulating the family there is the possibility of rapprochement, which I will address further in the following discussion of “In the Gloaming.”

In the story “In the Gloaming,” the ongoing dialogue between the mother and son, the watching and reflecting that the mother engages in, initiates a dialectical relationship between self and other (mother and child) that will affect and alter the conception of

that family. It is useful here to look at Jessica Benjamin's characterization of certain stages of a child's development and intimacy with the mother. Though Benjamin notes about a mother that "perhaps never will she feel more strongly, than in those first days of her baby's life, the intense mixture of his being part of herself, utterly familiar and yet utterly new, unknown, and other,"⁹⁷ for Janet and Laird AIDS has rendered this intense intimacy available to them at a very different stage: "She had as much of him now as she had when he was an infant; more, in a way, because she had had the memory of the intervening years as well, to round out her thoughts about him" (p. 230).

It is particularly interesting that Benjamin refers to a phase of developmental intimacy between child and adult called *rapprochement*, a word that is employed within the text of the story. A new section of the story, after a flirtatious discussion between Laird and Janet about what she should wear to his funeral ("Please buy a smashing dress, something mournful yet elegant" [p. 243]), begins: "Janet gave up on the idea of *rapprochement* between Martin and Laird" (p. 243). Laird's father, Martin, is characterized as having been distant during his son's and daughter's childhood, and is especially removed during this time of Laird's illness; on many nights he "vanished into the maw of his study" (p. 233). Though *rapprochement* here in the story most likely is intended simply to refer to a reconciliation, a breaching of distance, there is some advantage in looking at what this stage of *rapprochement* indicates. Benjamin comments that during "*rapprochement* the child first experiences his own activity and will in the context of the parents' greater power and his own limitations."⁹⁸ Though the child in this phase experiences a rupture in self-esteem, he or she "seeks to repair

⁹⁷Benjamin, p. 14.

⁹⁸Benjamin, p. 101.

it through identification, a particular kind of oneness with the person who embodies the power one now feels lacking.”⁹⁹ The psychoanalytic model I am employing here is a pre-oedipal one; the story centers on the intimacy between mother and son, their intimacy, and the story--rather like the pre-oedipal link between mother and child--is haunted by the missing connection between father and son:

“Dad ran off quickly,” he said one night. She had been wondering when he would mention it.

...

“I don’t think Dad can stand to be around me.”

“That’s not true.” It was true.

“Poor Dad. He’s always been a hypochondriac--we have that in common. He must hate this.”

“He just wants you to get well.”

“If that’s what he wants, I’m afraid I’m going to disappoint him again. At least this will be the last time I let him down” (pp. 234-235).

It is the absence of the father, however, that allows their intimacy to develop and deepen. In fact Janet’s attitude towards him changes as the family comes to cope with its necessary changes. When she stops to think that “Martin rarely came home for dinner anymore,” she allows herself to wonder if “[p]erhaps he was having an affair” (p. 243). But she reacts to this thought rather unconventionally: “Good for him, she even decided, in her strongest, most magnanimous moments. Good for him if he’s actually feeling bad and trying to do something to make himself feel better” (p. 243).

It is at the end of the story, after Laird has died and they are discussing what Laird might have wanted for his funeral, when Martin asks “in a tone she used to hear on those long-ago nights when he rarely got home until after the children were in bed and he relied on her to fill him in on what they’d done that day” (pp. 248-249), “Please tell me--what else did my boy like?” (p. 249). Martin is given words to speak only at the end of the story and these particular words, this question, are the closing

⁹⁹Benjamin, p. 101.

words of the story. It is a question suggesting that he will now perhaps be able to pursue the intimacy with his son that eluded him while his son was alive. It fits into prevailing notions of child development that exclude the father from the pre-oedipal bond to which Laird (and his mother) returned during Laird's days of dying.

Conclusion

I have set up my argument about bearing witness in the following way: it is those who are not so involved or implicated in the day-to-day exigencies of life with AIDS who are designated to bear witness for a projected mainstream readership to know about and learn about, and even vicariously experience, living with AIDS or with someone who has AIDS. This dynamic established the creation in the narrative of a self/other relationship into which the reader can identify with the well caretaker of the ill other. Shoshana Felman notes that "one does not have to *possess* or *own* the truth, in order to effectively *bear witness* to it."¹⁰⁰ The heterosexual male narrated fictions and the fictions of family do not undertake to know the truth of living with AIDS, necessarily, but in some way can still convey plausible knowledge and experience of living with AIDS by the proximity the characters have to the ill other.

In this chapter I have addressed AIDS fiction and identity as it is constructed through a dynamic of self and other. I looked at three sets of texts that constructed that dynamic in different ways. The heterosexual male narratives constructed the identity of the narrator through a paradigm of voyeurism. The lesbian narrators were engaged in a dynamic of a more interactive "watching" that allowed the narrator to "see" without the distance and disidentification inherent in voyeurism. And finally the family narratives reconstructed family roles in allowing for transformations

¹⁰⁰Felman, "Education and Crisis," p. 15; emphasis in the original.

necessitated by the introduction of HIV and AIDS into the family scene. This was a more intersubjective dynamic between self and other.

Felman writes that

to testify...before an audience of readers or spectators...is more than simply to report a fact or an event or to relate what has been lived, recorded and remembered. Memory is conjured here essentially in order to *address* another, to impress upon a listener, to *appeal* to a community.¹⁰¹

The fictions of witness are of course not testimonial accounts, but fictional narratives that attempt to authenticate the experience of caring for another who is ill with AIDS.

The witnesses here are the link between the disease and those involved with the disease, and, in the case of the heterosexual male and family fictions of witness, a projected mainstream audience that perceives itself as unimplicated and uninvolved and needs to learn about the disease from others like them.

I have argued that because the losses are not ones worked out on the basis of a personal identity or through an engagement with loss based on identity or community, the mechanisms of dealing with loss in the fictions of witness are better characterized as grief than as mourning or melancholia. The fictions of witness function as texts that facilitate a public grief and a working out of shifting identities on a more public scale, rather than the personal workings of mourning or melancholia that the gay and queer texts were claimed to be engaged in.

¹⁰¹Felman, "The Return of the Voice: Claude Lanzmann's *Shoah*," in Felman and Laub, p. 204; emphasis in the original.

Chapter 6

Conclusion

In her book *Teratologies*, Jackie Stacey asks “is writing one way of dealing with, deferring or, indeed, of denying mortality?”¹ Wendy B. Farris takes up this question in her essay “1001 Words: Fiction Against Death,” suggesting that all fiction is a Scheherazadian effort to oppose and delay death.² For her, “Scheherazade [is] the archetypal narrator, narrating for her life.”³ Farris argues that

When Scheherazade staves off her death for 1001 nights by telling a continuously enthralling chain of stories to her captor, the king, she dramatizes an intriguing aspect of all literary discourse: its capacity to simulate the postponement of human death through the prolongation of fictional life.⁴

If the image and story of Scheherazade is appropriate to most narrative fiction, then it is especially appropriate to narratives of illness, and particularly to narratives of AIDS. Indeed, there is a strong sentiment in AIDS narratives that there is a bargain similar to that of Scheherazade to be made with mortality: if the story is compelling enough, sad enough, authentic enough, or universal enough--if it touches the reader in an irrevocable way--then the writer, if not his loved ones, will be spared. There are some direct and also oblique references to Scheherazade throughout AIDS writing and other AIDS imagery. It is a trope used by John Greyson, for example, throughout his AIDS film *Zero Patience*.⁵ The film--the first feature-length musical about

¹ Jackie Stacey, *Teratologies: A Cultural Study of Cancer* (London and New York: Routledge, 1997), p. 28.

² For other considerations of Scheherazade and narrative see Tzvetan Todorov, *The Poetics of Prose*, Richard Howard, trans. (Oxford: Basil Blackwell, 1977); and Brian McHale, *Postmodernist Fiction* (New York and London: Methuen, 1987).

³ Wendy B. Farris, “1001 Words: Fiction Against Death,” *The Georgia Review*, Vol. 36, no. 4, 1992, p. 815.

⁴ Farris, p. 811.

⁵ *Zero Patience*, John Greyson, dir., 1993, Canada.

AIDS--opens and closes with a rendition of a song that exhorts, "tell the story of a virus... speak for me, Scheherazade," suggesting that those infected with the virus, like the figure of Scheherazade, require narrative as a fundamental part of the strategy to elude death. Edmund White remarks in an interview about his writing about AIDS: "I think when I finish that, then I'll die....It's like some fairy tale: when the princess finally finishes weaving the cloth, then she must die."⁶ Similarly, in the introduction to his book with Hubert Sorin, *Sketches from Memory*, White remarks that he "had so much trouble working on my text, largely because I had the superstition (which turned out to be clairvoyance) that if I arrived at the end of our 1001 nights he'd die, which proved to be the case."⁷ The irony is that although telling the stories to go with Sorin's drawings may have kept White alive, "[u]nlike Scheherazade I'm still alive at the end of the last tale, but my sultan is dead" (p. 7).

In a more oblique way, many of the texts considered in this study engage with the possibility of the talismanic power of writing to ward off death, a narrative strategy I examined in Chapter 4 particularly in relation to Carole Maso's novel *The Art Lover*. The Scheherazadian gesture in AIDS literature is one towards sustaining life rather than memorializing it or investing in the immortality that literature is often seen to be able to confer. This latter interest in immortality is an old trope of literature that can be found in poetry as far back as Sappho, Shakespeare, Donne, and Keats.⁸

⁶ Edmund White, Interview, in Thomas Avena, ed., *Life Sentences: Writers, Artists, and AIDS* (San Francisco: Mercury House, 1994), p. 243.

⁷ Edmund White and Hubert Sorin, *Sketches from Memory: People and Places in the Heart of Our Paris* (London: Chatto & Windus and Picador, 1994), p. 7; subsequent references will be made parenthetically within the text.

⁸ Consider, for example, Shakespeare's sonnet number 55, which begins: "Not marble nor the gilded monuments/Of princes shall outlive this pow'rful rhyme."

However in AIDS literature the investment is in forestalling death rather than in defeating it.⁹

I have suggested in this study that one reason why a significant response to the AIDS crisis has been in literature is because it constitutes an attempt to impose narrative order on a bewildering and chaotic experience. In this respect AIDS literature resembles other literatures of crisis, which also attempt to make order out of what is lived as uncertain and frightening, notably other literatures of illness and also Holocaust literature. The literature of AIDS is not unlike other literatures of illness in its grappling with the disintegration of the body, but, as I have suggested, the episodic and intermittent nature of AIDS has made it especially hard to narrativize. However, even though it is an illness resistant to narrativization, there was a remarkably immediate response to AIDS in the form of print media, including fiction, drama, and poetry. Although it might be tempting to characterize the literature of AIDS as a literature of trauma, it has not been characterized especially by delay or numbing or the repetition of a central experience and is therefore unlike other literatures of crisis, like Holocaust literature, for example.¹⁰ The urgency with which experiences of the illness were documented in literature is both an effect of the pre-existence of gay literature, which provided a forum for the production of AIDS literature, and also perhaps a reaction to an increasing resentment that lesbian and gay history has been

⁹ Foucault makes an interesting distinction between the impulse in Greek narrative or epic to ensure the immortality of the hero and Arabic stories, *The Arabian Nights* in particular, to avoid death. See Michel Foucault, "What Is an Author?" in Donald F. Bouchard, ed., *Language, Counter-Memory, Practice: Selected Essays and Interviews* (of Michel Foucault), Donald F. Bouchard and Sherry Simon, trans. (Oxford: Basil Blackwell, 1977). For a more felicitous translation of the same essay, suggesting slightly different meanings, see Josué V. Harari, *Textual Strategies: Perspectives in Post-Structuralist Criticism* (London: Methuen, 1980), pp. 141-160.

¹⁰ For discussion of trauma and literature, including Holocaust literature, see Cathy Caruth, ed., *Trauma: Explorations in Memory* (Baltimore and London: The Johns Hopkins University Press, 1995).

inadequately and erroneously documented, as exemplified by early AIDS obituaries in the mainstream press that often were severe distortions of the lives of those represented.¹¹

Because this literature is about the disintegration of the body, producing a crisis of the self, it is also crucially about the demise of the subject. It is this challenge that has resulted in an intense critical engagement with the questions of representation and narration that preoccupy these texts.

Although novels were an early response to AIDS, the novel form has not been able to contain the enormity of AIDS. Yet narratives produced in response to AIDS changed the course of gay fiction. One way, as I discussed in Chapter 2, is that gay writers finally had recourse to a universal narrative: while they had traditionally been locked out of the universal literary narratives of marriage, procreation, and adultery, they now at last had recourse to the universal narrative of degeneration and death. Another way that gay fiction changed is in its giving way to the formal transformation into what I have termed a queer literature. As I discuss in Chapter 3 and 4, part of this shift from gay to queer formal properties in literature, which might also be seen as a movement from realist to postmodernist narrative, has both produced and resulted from a thematic shift from mourning to melancholia.

The literature of mourning, although implicated in more conservative, restrictive, and realist terms of representation, was nevertheless important in its

¹¹For further discussion of mainstream AIDS obituaries see Michael Bronski, "Death and the Erotic Imagination," in Erica Carter and Simon Watney, eds., *Taking Liberties: AIDS and Cultural Politics* (London: Serpent's Tail, 1989), p. 222; and John Gallagher, "Silence=Stigma," *The Advocate*, February 7, 1995, pp. 31 and 32. For fictional representations of the distortions of mainstream AIDS obituaries see Allen Barnett, "The *Times* As It Knows Us," *The Body and Its Dangers* (New York: St. Martin's Press, 1990), pp. 70-71; and Christopher Coe, *Such Times* (London: Hamish Hamilton, 1993), pp. 283-284.

historical moment, in terms of the political and social needs of gay men at that time. It continues to be important as such literature continues to be produced as a means of solidifying and sustaining the conception of a knowable and fixed gay identity in a world that challenges both the possibility of and the definitions of such a gay identity. I have shown that melancholia, as conveyed and constructed in AIDS literature, has been, rather than pathologically debilitating, as the term is often understood, instead productive, that the inability to control grief or accept loss has made for a more challenging and complex literature and therefore a more resonant expression of complex identities. While there has been a need for an understanding of gay identity as stable, there has also been a growing need, impelled by AIDS and its attendant losses, uncertainties, and instabilities, for an identity that is not fixed, that is often not easily knowable, and that is not grounded in prescribed behaviors or identifications.

If my focus on queer AIDS literature has considered it as a literature that questions self and identity, and my focus on gay AIDS fiction has considered it in the context of a particular reading community, my study of more mainstream literary responses to AIDS has looked at the way that the meaning of loss can be negotiated in a public context. In considering representations of mainstream responses to AIDS I determined that without reference to the terms associated with a personal sexual identity, like gay or queer, the mechanisms for working out loss were more concerned with reinforcing the relationship between self and other: that is, a self who is well and an other who is ill, and, often, a self who is not gay and an other who is gay. It is precisely the inability or refusal to identify with the ill other, on the part of the narrator or main protagonist, that makes this literature neither mournful nor melancholic but engaged in a more public, and sometimes pedagogical, grief. That is,

there is an assumption that prescribed relational roles must be reworked and relearned in order for the working out of grief to be possible.

Just as the course of AIDS continues to change, the literary forms and sexual identities that are articulated in its narratives are continuing to change. In some ways the novel *Plays Well With Others*, by Allan Gurganus, signals the end of one kind of AIDS novel. The focus of the narrative are the losses that the protagonist, Hartley, incurs when so many of his friends die. Early in the novel he proclaims, “[b]y now, my nerves are shot but the news is good: today, at last, my every dying one is safely dead.”¹² He begins his tale at the end, “div[ing] back down among the wreckage, gathering precious evidence” (p. 25). As an AIDS novel of the protease inhibitor age, the narrator recognizes that “[t]hese days, people newly sick with it expect to live much longer. Great. But not my crowd. Always pirate pioneers, we were, alas, among its first” (p. 23). The novel spills over with language: “Mr. Gurganus is a writer of excesses: he loves to pile detail upon detail, anecdote upon anecdote; he loves the operatic scene, the farcical joke, the grandiloquent phrase.”¹³ In so doing, the novel seems to be trying to say every last word that can be said about AIDS and loss and love in New York City at the end of the twentieth century. The narrative slips often into the second person and sometimes, poignantly, the narrator invokes the reader to help him tell his story, as though even with all his words, he is ultimately at a loss for words:

I try and try explaining. I get close, I feel it, I fall back. I fail afresh. I can't explain. You must help me out with it. Please, provide a little of your own, from your own rich life. I'll count on that. You had to have been there.

¹²Allan Gurganus, *Plays Well With Others* (London and Boston: Faber & Faber, 1997), p. 21; subsequent references will be made parenthetically within the text.

¹³Michiko Kakutani, “That Magical Isle of Talent, Extravagance and Doom,” *The New York Times*, November 4, 1997, p. E8.

Thank you. You have been. (p. 302).

The novel is separated into three sections: Before, After, and After After, suggesting that he has accounted for what came before AIDS, what happened after AIDS, and what happened even after that, the final word.

In fewer and fewer narratives, after the era of the AIDS novel that this thesis considers, is AIDS the primary concern or focus. AIDS is taken up as a concern among other concerns, and even as a literary trope among others. A book reviewer for *A&U*, "America's AIDS Magazine," writes:

As the pandemic enters its third decade, and with the advent of more writing about AIDS, writers have learned to present the crisis and its impact on life and culture as part of a larger literary picture, rather than as its focus.¹⁴

One example of this is Michael Cunningham's novel *The Hours*, published in 1998 and awarded the Pulitzer Prize for literature.¹⁵ While there is a subplot in the novel that is about AIDS, the rest of the novel's story is mainly about matters very far from the concerns, even the era, of AIDS, namely, Virginia Woolf and her novel *Mrs. Dalloway* and Mrs. Brown, a woman living with her husband and son in America in the 1950s, who reads *Mrs. Dalloway*. It is revealing that Cunningham, a leading writer of gay fiction, is concerned in his imaginative writing with literature, with history, with gayness, and, yes, with AIDS, but not as the center or primary focus of his literary attention and imagination.

Like Gurganus's novel, Cunningham's novel contains a character who laments that though there is now encouraging news about the drug cocktails that will save lives, it is too late for the ones that he or she loves. In Cunningham's novel the

¹⁴Robert Pela, "The Culture of AIDS," *A&U*, Issue 47, September 1998, p. 59.

¹⁵Michael Cunningham, *The Hours* (New York: Farrar, Straus and Giroux, 1998); subsequent references will be made parenthetically in the text.

modern day Clarissa wonders, “[h]ow can she help resenting Evan and all the others who got the new drugs in time; all the fortunate...men and women whose minds had not yet been eaten into lace by the virus” (p. 55). Because of protease inhibitors, AIDS can no longer be thought of in a single or straightforward way; because some people thrive on these new drug combinations and others cannot tolerate them--and for some, as these latter-day AIDS novels suggest, they have arrived too late--there are no standard stories of what happens when you have AIDS. The advent of protease inhibitors is one important factor that has changed the possible narratives for AIDS and thus the terms and forms of its mourning. *The Hours* functions in part as a last lament for those who have not benefited from the new therapies, and also seems to encompass many of the narrative strategies that I have delineated in this thesis. The publication of *The Hours* signals the possibility of a novel that, in representing gay characters in New York City at the end of the twentieth century, invokes and refers to a gay reading community. At the same time, in featuring as a main protagonist a woman, Clarissa, who is in a stable long-term lesbian relationship but is caring for her ill friend, Richard, who was once her lover when they lived together in a house with his (other) lover, Louis, the novel is structured around complex sexual identities. In a kind of incorporation of Virginia Woolf’s life and her novel *Mrs. Dalloway*, *The Hours* extends the boundaries of literary form in a style that I have suggested is connected to the representation of queer identity and to melancholia. Finally, in focusing just as centrally on another character, Mrs. Brown, who occupies a conservative role as a housewife and mother in suburban America, and whose creative aspirations take the form of reading, the novel positions itself within the terms of the literary mainstream. While these thematic concerns and formal properties are

connected to AIDS in the novel, they are not predicated on it, and in this way signal a transitional point in AIDS writing: that as long as the new drugs work, no longer will AIDS need to be the central focus of fiction, but also that in any writing that invokes this historical moment--the last score of years of the millenium--there is no way not to feature the devastations and the fundamental uncertainties that are harbored in the social psyche because of AIDS.

Though the new drug therapies have been heralded as an end to AIDS, melancholia is still a component of narrative responses to AIDS. While *The Hours* may in some respects resist melancholia, it is nevertheless haunted by melancholia, that is, it is tempted by the refusal to mourn. However, a melancholic inability, or refusal, to adjust to the devastations and uncertainties that AIDS has produced has been paradoxically productive of the very means by which to work through the losses--corporeal, emotional and historical--that AIDS has inspired. If AIDS narrative has not, in its Scheherazadian endeavor, been able actually to prolong life, it has made possible, in response to the AIDS crisis, the beginning of the work of mourning.

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This bibliography covers all AIDS fiction and AIDS memoirs and autobiographies that I am aware of that were published between 1988 and 1995, the period that is the focus of this thesis. The style follows that of the Chicago Manual, with works by multiple authors shown chronologically, most recent first.

I have relied on the following bibliographies of AIDS literature to fill in the gaps of my own reading: Franklin Brooks and Timothy F. Murphy, "Annotated Bibliography of AIDS Literature, 1982-91," in Murphy and Suzanne Poirier, eds., *Writing AIDS: Gay Literature, Language, and Analysis* (New York: Columbia University Press, 1993); Steven F. Kruger, "Bibliography of AIDS Literature," *AIDS Narratives: Gender and Sexuality, Fiction and Science* (New York and London: Garland Publishing, 1996); Emmanuel S. Nelson, "Selected Bibliography," in Nelson, ed., *AIDS: The Literary Response* (New York: Twayne Publishers, 1992); Judith Laurence Pastore, "Annotated Bibliography," in Pastore, ed., *Confronting AIDS Through Literature: The Responsibilities of Representation* (Chicago: University of Illinois Press, 1993).

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